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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	United States Liability Insurance Company
<b>TOI/Sub-TOI:</b>	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
<b>Product Name:</b>	Specialty General Package		
<b>Project Name/Number:</b>	Rule Revision/ PROF-SGP-2016-114-Edit		

## Filing at a Glance

Company:	United States Liability Insurance Company
Product Name:	Specialty General Package
State:	District of Columbia
TOI:	05.0 CMP Liability and Non-Liability
Sub-TOI:	05.0003 Commercial Package
Filing Type:	Rule
Date Submitted:	11/17/2016
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Effective Date	03/20/2017
Requested (New):	
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Author(s):	Katherine Watts
Reviewer(s):	
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Disposition Status:	
Effective Date (New):	
Effective Date (Renewal):	

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	United States Liability Insurance Company
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## General Information

Project Name: Rule Revision	Status of Filing in Domicile:
Project Number: PROF-SGP-2016-114-Edit	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 11/17/2016	
State Status Changed:	Deemer Date:
Created By: Katherine Watts	Submitted By: Katherine Watts
Corresponding Filing Tracking Number:	

### Filing Description:

This is a revision to Rate Rule manual to correct a typographical error. There is no rate impact associated with this change. See the attached manual.

We appreciate your review and approval.

## Company and Contact

### Filing Contact Information

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### Filing Company Information

United States Liability Insurance Company	CoCode: 25895	State of Domicile:
1190 Devon Park Drive	Group Code: 31	Pennsylvania
PO Box 6700	Group Name: Berkshire Hathaway Group	Company Type: Property & Casualty
Wayne, PA 19087-2191	FEIN Number: 23-1383313	State ID Number:
(888) 523-5545 ext. 2586[Phone]		

## Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	United States Liability Insurance Company
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## Correspondence Summary

### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Rate	CW Rate Rule Manual	Katherine Watts	11/17/2016	11/17/2016

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	United States Liability Insurance Company
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## Amendment Letter

Submitted Date: 11/17/2016

Comments:

Amended the number of pages (1 thru 18) on the rate rule tab.

Changed Items:

*No Form Schedule Items Changed.*

Rate Schedule Item Changes					
Item No.	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Date Submitted
1	CW Rate Rule Manual	Pages 1 thru 18	Replacement	USLI-130752544	11/17/2016 By:
<i>Previous Version</i>					
1	CW Rate Rule Manual	Pages 1 thru 41	Replacement	USLI-130752544	11/17/2016 By: Katherine Watts

*No Supporting Documents Changed.*

<b>SERFF Tracking #:</b>	USLI-130811298	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	PROF-SGP-2016-114-EDIT
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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	United States Liability Insurance Company		
<b>TOI/Sub-TOI:</b>	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package				
<b>Product Name:</b>	Specialty General Package				
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## Rate Information

Rate data does NOT apply to filing.

State:	District of Columbia	Filing Company:	United States Liability Insurance Company
TOI/Sub-TOI:	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
Product Name:	Specialty General Package		
Project Name/Number:	Rule Revision/ PROF-SGP-2016-114-Edit		

## Rate/Rule Schedule

Item No.	Schedule Item Status	Exhibit Name	Rule # or Page #	Rate Action	Previous State Filing Number	Attachments
1		CW Rate Rule Manual	Pages 1 thru 18	Replacement	USLI-130752544	CW SGP Package Rate and Rule Manual 11-09-2016 (INCLUDES PROPERTY) final.pdf

**United States Liability Insurance Group**  
**Specialty General Package**  
**Rate and Rule Manual**

**This manual contains the rules, rates and rating procedures for Professional – Allied Health (E&O, GL and Property) and Professional – Medical Providers Office Package (GL and Property)**

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**A. GENERAL RULES**

All rules are designed to be utilized with rates. All references in the rules and examples to rates and/or premiums (including base premiums) shall be interpreted to mean those established by the individual insurance company.

**1. Product Options**

This product may be written in several ways as described below:

Professional Liability on a monoline basis

Professional Liability with General Liability

Professional Liability with General Liability and Property

Professional Liability with Property

No policy is to be written without the Professional Liability coverage part

**2. Multi-State Risks**

We do not have the ability to write multi-state risks in one policy. If an entity qualifying under this filing is written with a location in another state, combinable due to ownership, the insured will not be penalized from a premium standpoint due to the application of a Minimum Premium or other factors that would not normally apply if the locations could be written in one policy.

**3. Terrorism Coverage**

Coverage is available for Certified Acts of Terrorism per the Terrorism Risk Insurance Reauthorization Act.

See [state exception page](#) for charges.

**4. Incidental Occupancies**

Rates for other incidental occupancies may be used if filed in another admitted product<sup>[A1]</sup>.

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**B. PROFESSIONAL LIABILITY – ERRORS AND OMISSIONS**

The below rates/rules apply to the Allied Health Errors & Omissions product. Monoline Medical Providers EPL rates/rules are filed under separate cover.

**1. Premium Determination Rule**

- a. Eligible Classes for Professional Liability Coverage<sup>[A2]</sup>

Class	Description	Class	Description
73702	Art Therapist	73746	School Guidance Counselor
73704	Dance Therapist	73748	Social Worker
73706	Dental Assistant	73750	Speech Language Pathologist
73708	Dental Hygienist	73752	Wellness Counselor
73710	Dietician/Nutritionist	73754	X-Ray Technician
73712	Drama Therapist	73756	Athletic Trainer
73714	EEG Technician	73758	Corrective Therapist
73716	First Aid/CPR Training	73760	Rehabilitation Therapist
73718	Home Health Educator	73762	Physical Therapist
73720	Home Health Aide (non-medical)	73764	Physical Therapist Aide
73722	Horticultural Therapist	73766	Occupational Therapist
73724	Lactation Consultant	73768	Occupational Therapist Aide
73726	Medical Office Assistant	73770	Recreational Therapist
73728	Medical Office Administrative Assistant	73772	Pet Therapist
73730	Mental Health Counselor	73774	Massage Therapist
73732	Music Therapist	73776	Personal Trainer/Fitness Instructor
73734	Optician	73780	Beautician/Barber
73736	Optometric Assistant	73782	Nail Technician
73738	Pastoral Counselor <sup>1</sup>	73784	Cosmetologist
73740	Patient Intake Technician	73786	Aesthetician
73742	Phlebotomist	73788	Aromatherapist
73744	Polysomnographic Technologist		

- b. Follow these steps to determine premium:

- Step 1. Determine the rate by multiplying the number of full time equivalent professionals in each class by the base rate for each class, adding the results together for the limit chosen. For Home Health Aide class, the rate will change to \$100 per professional after the first three professionals
- Step 2. Multiply the result of Step 1 by the deductible factor
- Step 3. Multiply the result of Step 2 by the applicable state multiplier
- Step 4. Multiply the result of Step 3 by the Retroactive Date Factor

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- Step 5. The result of Step 4 is subject to a minimum premium  
Step 6. Multiply the result of Step 5 by the applicable Premium Modifiers  
Step 7. The result of Step 6 is subject to a minimum premium  
Step 8. Add the charges for optional coverages to the result of Step 6

## 2. Base Rates

No deductible applies.

	Rate Class					
Limit per incident/aggregate	I Minimum / Low Hazard	II Medium /Average Hazard	III Moderate Hazard	IV Moderate / High Hazard	V High Hazard	VI Very High Hazard
\$500,000/\$500,000	\$272	\$302	\$388	\$647	\$863	\$1,295
\$500,000/\$1,000,000	\$276	\$306	\$394	\$656	\$875	\$1,313
\$1,000,000/\$1,000,000	\$307	\$341	\$439	\$731	\$975	\$1,463
\$1,000,000/\$2,000,000	\$310	\$345	\$443	\$739	\$985	\$1,478
\$1,000,000/\$3,000,000	\$315	\$350	\$450	\$750	\$1,000	\$1,500
\$2,000,000/\$4,000,000 <sup>[CD3]</sup>	\$356	\$395	\$508	\$847	\$1,130	\$1,695
\$2,000,000/\$5,000,000	\$358	\$398	\$511	\$852	\$1,137	\$1,706
\$3,000,000/\$5,000,000	\$384	\$426	\$547	\$912	\$1,217	\$1,826
\$5,000,000/\$5,000,000	\$421	\$467	\$600	\$1,001	\$1,335	\$2,003

## 3. Premium Basis

The premium basis is the number of individuals working as professional service providers for the insured plus independent contractors employed by the insured for the provision of professional services, if AH 211 applies.

The premium basis is the number of individuals working as professional service providers for the insured plus 0.50 times the number of independent contractors employed by the insured for the provision of professional services, if AH 211 does not apply.

(Part time professional service providers are counted as 0.50.)

## 4. Deductible Factors

Deductible Amount	Factor
\$1,000	0.99
\$2,500	0.97
\$5,000	0.95
\$10,000	0.90

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\$15,000	0.85
\$25,000	0.80

## 5. Prior Acts Coverage

The Professional Liability base rates contemplate full prior acts coverage (1.00 step factor). Use the factors below when a retroactive date is elected.

Retroactive Date	Factor
Retro of inception of policy	.85
1 yr prior acts	.90
2 yrs prior acts	.95
3 or more years prior acts	1.00

## 6. State Multiplier

Refer to the [State Exception Pages](#)

## 7. Premium Modifiers

### a. Scheduled Rating

The schedule rating credit or debit will be equal to the sum of the selected credits or debits given for each individual risk characteristic shown in the table below, subject to a maximum sum of all credits or debits not exceeding 25%.

Characteristic	Range of credit/debit factors	
Nature of Operations	.75	1.25
Risk Management	.75	1.25
Owners/Partners/Officers Experience	.75	1.25

### b. Experience Rating

"None" No claims in past five years	.85	1.00
"Minimal" One or more claims reported in past five years with payment plus reserves less than \$10,000	1.00	1.25
"Material" One or more claims in past five years with payments plus reserves exceeding \$10,000	1.25	1.50

## 8. Minimum Premium Rule

\$500 policy minimum premium applies when there is more than one professional for coverage.

\$425 policy minimum premium applies when there is only one professional for coverage.

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**9. Optional Coverages**

a. Patient Molestation for Professional E&O

1) For Policies with One Professional only:

a) Limits of \$25,000/50,000 are included at no additional charge.

b) Optional Increased Limits

Defense coverage for Patient Molestation may be provided at a \$100,000/\$300,000 limit. This is a shared limit with the policy limits. The charge for this coverage is 10% of the Professional Premium subject to a minimum of \$100.

c) AH-212 Defense for Allegations of Patient Molestation Coverage  
Endorsement shall be attached to the policy.

2) For Policies with Greater than One Professional:

Patient Molestation Coverage is not available. The AH-226 Patient Molestation or Abuse Exclusion shall be attached to the policy. A -\$8.00 credit shall be applied against the Professional Liability premium.

b. Additional Insured

AH-201 – Additional Insured

Charge \$50 for the first AI added; no charge for additional entities added.

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**C. GENERAL LIABILITY**

These General Liability rates/rules are available for Allied Health and Medical Providers Office Package policies. Any exceptions are noted below.

**1. Company Rates<sup>[A4]</sup>**

**a. Categories**

The Commercial General Liability coverage is divided into two major categories for rating purposes:

- 1.) Premises/Operations; and
- 2.) Products/Completed Operations.

**b. Company GL Rates – Allied Health Professionals<sup>[A5]</sup>**

**1) Table assignment**

Table assignment will be based on the premises hazard at the insured location – risks with higher hazard premises, based on equipment and treatment facility features, will be assigned to table 2.

**2) Eligible Classes for General Liability Coverage<sup>[A6]</sup>**

**a) Allied Health**

<b>Class</b>	<b>Description</b>	<b>Class</b>	<b>Description</b>
73701	Art Therapist	73745	School Guidance Counselor
73703	Dance Therapist	73747	Social Worker
73705	Dental Assistant	73749	Speech Language Pathologist
73707	Dental Hygienist	73751	Wellness Counselor
73709	Dietician/Nutritionist	73753	X-Ray Technician
73711	Drama Therapist	73755	Athletic Trainer
73713	EEG Technician	73757	Corrective Therapist
73715	First Aid/CPR Training	73759	Rehabilitation Therapist
73717	Home Health Educator	73761	Physical Therapist
73719	Home Health Aide (non-medical)	73763	Physical Therapist Aide
73721	Horticultural Therapist	73765	Occupational Therapist
73723	Lactation Consultant	73767	Occupational Therapist Aide
73725	Medical Office Assistant	73769	Recreational Therapist
73727	Medical Office Administrative Assistant	73771	Pet Therapist
73729	Mental Health Counselor	73773	Massage Therapist
73731	Music Therapist	73775	Personal Trainer/Fitness Instructor
73733	Optician	73779	Beautician/Barber
73735	Optometric Assistant	73781	Nail Technician
73737	Pastoral Counselor <sup>1</sup>	73783	Cosmetologist
73739	Patient Intake Technician	73785	Aesthetician
73741	Phlebotomist	73787	Aromatherapist

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73743	Polysomnographic Technologist		
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<sup>1</sup> Independent Contractor with no religious institution affiliation.

b) Medical Providers Office[CD7]

Class	Description
76196	Acupuncturist
76197	Anesthesiology
76198	Chiropractor
76200	Clinics
76201	Dentist / Endodontist / Orthodontist
76202	Dermatologist
76203	Doctors
76204	Family / General Practice
76205	Hematology
76206	Internal Medicine / Specialist
76207	Internal Medicine
76208	Med Spas / Laser Therapy
76209	Nutritionist
76210	OB / GYN / Fertility Clinic
76211	Ophthalmologist)
76212	Optometrist / Optician
76213	Pediatrics
76214	Physical / Occupational Therapist
76215	Podiatry)
76216	Psychologist / Psychiatrist
76217	Sleep Disorder Center
76218	Surgeon - Oral / Maxillofacial
76219	Surgeon - Plastic (Cosmetic / Aesthetic)
76220	Surgeon - Plastic (Reconstruction)
76221	Surgeon - All Other)
76222	Surgery Centers - Ambulatory Cov. A

- 3) Rates apply per professional; rate each independent contractor to be covered at .50 times the rate per professional

Limit (\$1,000s)	Table 1	Table 2
500/500	\$27.62	\$75.94
500/1000	\$28.00	\$77.00
1000/1000	\$31.20	\$85.80

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1000/2000	\$31.52	\$86.68
1000/3000	\$32.00	\$88.00
2000/4000[CD8]	\$36.15	\$99.41
2000/5000	\$36.38	\$100.01
3000/5000	\$38.94	\$107.08
5000/5000	\$42.73	\$117.48

- 4) Apply state multiplier – see [state exception pages](#) for applicable factor.
- 5) Apply number of employees multiplier from the table below[CD9]:

Number of Employees	Factor
0 – 15 Employees	1.00
16 – 30 Employees	0.80
31 & up Employees	0.70

- 6) [Apply a minimum General Liability Premium of \\$150.\[PI10\]](#)
- 7) ISO Territory Definitions will apply.

c. **Basic Limits[A11]**

- 1) Company rates are shown at the following [limits\[A12\]](#):
  - a) Multiple limit options for each occurrence for bodily injury and property damage. Subject to this limit:
    - (1) \$100,000 for damage to premises rented to the insured
    - (2) \$5,000 per person for medical payments.
    - (3) Limit equal to the occurrence limit for per person or organization for personal and advertising [injury\[A13\]](#).
  - b) Multiple limit options provided under Paragraph a. are subject to either the General Aggregate Limit (for other than products/completed operations) or the Products/Completed Operations Aggregate Limit, whichever is applicable.
- 2) The Occurrence Limit applies to premises/ operations and products/completed operations.
- 3) The Aggregate Limits apply separately to each year of the policy or any applicable policy period less than 1 year (other than an extension of less than 1 year after the policy is issued).
- 4) The Aggregate Limits may be reinstated when exhausted.

d. **Increased Limits**

These factors contemplate that the limit for personal and advertising injury will be equal to the occurrence limit selected. The occurrence limit applies to premises/operations and products/completed operations; therefore, different occurrence limits cannot be selected. The basic damage to premises rented to you and medical payments limits do not increase with increases in other limits.

**2. Increased Limits Tables[A14]**

- a. Procedures
  - 1) All limits are expressed in thousands in dollars.

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2) State company rates are shown at all available limit options in Section C., Rule 1.b. above.

b. Increased Limits Table Assignments (ILTAs)  
Not applicable to this product as company rates are shown at all available limit options.

c. For higher limits Damage to Premises Rented to You, charge the following additional premium:

\$250,000	\$135.00
\$300,000	\$150.00
\$500,000	\$200.00
\$1,000,000	\$350.00

For limits of \$50,000, apply a credit of 1% to the premises operations premium.

d. For higher Medical Payments limits, charge the following additional premium:

\$10,000	\$200.00
\$25,000	\$400.00

For limits of \$1,000, apply a credit of 1% to the premises operations premium.

### 3. Coverage Exclusion Modifications

All "Premises/Operations Loss Costs" contain fringe loadings. The following chart provides the credit allowed for excluding one of these coverages. Modifications are applied to the final "Premises/Operations" rate only. Credit varies by class category.

Coverage	Mercantile (10000s), Professional Classes (70000s)	Miscellaneous (40000s)	Mfg/Processing (50000s)	Bldg & Premises (60000s)
Personal & Advertising Injury CG 2138	10%	10%	5%	10%
Medical Payments CG 2135	3%	2%	-	3%
Damage to premises rented CG 2145	2%	3%	5%	-
Contractual Liability Limitation CG 2139	5%	5%	10%	7%

### 4. Liability Deductible<sup>[A15]</sup>

\$0 Deductible Applies. No optional liability deductibles are available for this product.

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**5. Bases of Premium**

The basis used for determining the premium charge for each classification is indicated in the classification section of this Manual. The definitions of the bases of premium are as follows:

- a. **Admissions**  
The total number of persons, other than employees of the named insured, admitted to the event insured or to events conducted on the premises whether on paid admissions, tickets, complimentary tickets or passes.  
The rates apply per 1,000 admissions.
- b. **Area**  
The total number of square feet of floor space at the insured premises, computed as follows:
  - 1.) For entire buildings, by multiplying the product of the horizontal dimensions of the outside of the outer building walls by the number of floors.
  - 2.) For tenants, determine the area they occupy in the same manner as for entire buildings.
  - 3.) The rates apply per 1,000 square feet of area.
- c. **Each**  
This basis of premium involves units of exposure, and the quantity comprising each unit of exposure is indicated in the classification footnotes, such as "per person". For Allied Health Professionals, rates apply per Professional employee.
- d. **Gross Sales**
  - 1.) **Definition**  
The gross amount charged by the named insured, concessionaires of the named insured or by others trading under the insured's name for:
    - a.) All goods or products, sold or distributed;
    - b.) Operations performed during the policy period;
    - c.) Rentals; and
    - d.) Dues or fees.
  - 2.) **Inclusions**  
The following items shall not be deducted from gross sales:
    - a.) Foreign exchange discounts;
    - b.) Freight allowance to customers;
    - c.) Total sales of consigned goods and warehouse receipts;
    - d.) Trade or cash discounts;
    - e.) Bad debts; and
    - f.) Repossession of items sold on installments (amount actually collected).
  - 3.) **Exclusions**  
The following items shall be deducted from gross sales:
    - a.) Sales or excise taxes which are collected and submitted to a governmental division;
    - b.) Credits for repossessed merchandise and products returned. Allowances for damaged and spoiled goods;
    - c.) Finance charges for items sold on installments;

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- d.) Freight charges on sales if freight is charged as a separate item on customers invoice;
    - e.) Royalty income from patent rights or copyrights which are not product sales, and
    - f.) Rental receipts for products liability coverage only.
  - 4.) Application  
The rates apply per \$1,000 of Gross Sales.
- e. Payroll
  - 1.) Definition
    - a.) Payroll means remuneration.
    - b.) Remuneration means money or substitutes for money.
  - 2.) Inclusions  
Payroll includes the following items:
    - a.) Commissions;
    - b.) Bonuses;
    - c.) Extra pay for overtime work, except as provided in Paragraph E.4.;
    - d.) Pay for holidays, vacations or periods of sickness;
    - e.) Payment by an employer of amounts otherwise required by law to be paid by employees to statutory insurance or pension plans, such as the Federal Social Security Act;
    - f.) Payment to employees on any basis other than time worked, such as piecework, profit sharing or incentive plans;
    - g.) Payment or allowance for hand tools or power tools used by hand provided by employees and used in their work or operations for the insured;
    - h.) The rental value of an apartment or a house provided for an employee based on comparable accommodations;
    - i.) The value of lodging, other than an apartment or house, received by employees as part of their pay, to the extent shown in the insured's records;
    - j.) The value of meals received by employees as part of their pay to the extent shown in the insured's records;
    - k.) The value of store certificates, merchandise, credits or any other substitute for money received by employees as part of their pay;
    - l.) The payroll of mobile equipment operators and their helpers, whether or not the operators are designated or licensed to operate automobiles. If the operators and their helpers are provided to the insured along with equipment hired under contract and their actual payroll is not known, use 1/3 of the total amount paid out by the insured for the hire of the equipment;
    - m.) The payroll of executive officers of a corporation and individual insureds and co-partners. Use the payroll shown on the state exceptions under ISO Rule 24. For the purposes of payroll determination, managers of limited liability companies shall be considered executive officers and members of limited liability companies shall be considered co-partners;  
The executive officers of a corporation are those persons holding any of the officer positions created by the named

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insured's charter, constitution or by-laws or any other similar governing document.

The payroll of all executive officers of a corporation and individual insureds or co-partners engaged principally in clerical operations or as salespersons, and officers and co-partners who are inactive for the entire policy period, shall not be included for premium purposes.

For part-time or seasonal businesses the payroll amounts may be reduced by 2 percent for each full calendar week in excess of twelve during which the risk performs no operations.

- n.) The payroll of leased workers furnished to the named insured by a labor-leasing firm. Premium on such payroll shall be based on the classifications and rates, which would have applied if the leased workers had been the direct employees of the named insured. If payroll is unavailable, use 100% of the total cost of the contract for leased workers as the payroll of leased workers. The premium shall be charged on that amount as payroll; If investigation of a specific employee-leasing contract discloses that a definite amount of the contract price represents payroll, such amount shall be considered payroll for premium computation purposes.
- o.) Fees paid to employment agencies for temporary personnel provided to the insured.

3.) Exclusions

- a.) Tips and other gratuities received by employees;
- b.) Payments by an employer to group insurance or group pension plans for employees, other than payments covered by Paragraph E.2.e.;
- c.) The value of special rewards for individual invention or discovery;
- d.) Dismissal or severance payments except for time worked or accrued vacation;
- e.) The payroll of clerical office employees;  
Clerical office employees are those employees who work in an area which is physically separated by walls, floors or partitions from all other work areas of the insured and whose duties are strictly limited to keeping the insured's books or records or conducting correspondence, including any other employees engaged in clerical work in the same area.
- f.) The payroll of salespersons, collectors or messengers who work principally away from the insured's premises. Salespersons, collectors or messengers are those employees engaged principally in any such duties away from the premises of the employer;  
This term does not apply to any employee whose duties include the delivery of any merchandise handled, treated or sold.
- g.) The payroll of drivers and their helpers if their principal duties are to work on or in connection with automobiles;

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- h.) The payroll of aircraft pilots or co-pilots if their principal duties are to work on or in connection with aircraft in either capacity; and
      - i.) The payroll of draftsmen if their duties are limited to office work only and who are engaged strictly as draftsmen in such a manner that they are not exposed to the operative hazards of the business. The payroll of these draftsmen shall be assigned to the classification "Draftsmen" – Code 91805.
    - 4.) Overtime
      - a.) Definition

Overtime means those hours worked for which there is an increase in the rate of pay:

        - (1) For work in any day or in any week in excess of the number of hours normally worked, or
        - (2) For hours worked in excess of 8 hours in any day or 40 hours in any week, or
        - (3) For work on Saturdays, Sundays or Holidays.

In the case of guaranteed wage agreements, overtime means only those hours worked in excess of the number specified in such agreement.
      - b.) Exclusion Of Overtime Payroll

The extra pay for overtime shall be excluded from the payroll on which premium is computed as indicated in (1) or (2), provided the insured's books and records are maintained to show overtime pay separately by employee and in summary by classification.

        - (1) If the records show separately the extra pay earned for overtime, the entire extra pay shall be excluded.
        - (2) If the records show the total pay earned for overtime (regular pay plus overtime pay) in one combined amount, 1/3 of this total pay shall be excluded. If double time is paid for overtime and the total pay for such overtime is recorded separately, 1/2 of the total pay for double time shall be excluded.

Exclusion of overtime pay does not apply to payroll assigned to the "Stevedoring" classifications.
    - 5.) Application

The rates apply per \$1,000 of payroll.
  - f. Total Cost

The total cost of all work let or sublet in connection with each specific project including:

    - 1.) The cost of all labor, materials and equipment furnished, used or delivered for use in the execution of the work, however, do not include the cost of finished equipment installed but not furnished by the subcontractor if the subcontractor does no other work on or in connection with such equipment; and
    - 2.) All fees, bonuses or commissions made, paid or due.

The rates apply per \$1,000 of Total Cost.
  - g. Units

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A single room or group of rooms intended for occupancy as separate living quarters by a family, by a group of unrelated persons living together, or by a person living alone.

**6. Additional Interests - Liability<sup>[A16]</sup>**

Policies may be written to cover additional interests. Our premium charges are as listed below.

Form Number	Interest	Premium Charge
CG 2005	Controlling Interest	Included
CG 2010	Owner, Lessees or Contractor	\$100
CG 2011	Manager/Lessors	\$50 <sup>[CD17]</sup>
CG 2012	Permits	Included
CG 2013	Permits Related to Premises	Included
CG 2018	Mortgagee, Assignee or Receiver	Included
CG 2023	Executors, Administrators, Trustees	Included
CG 2024	Leased Land	Included
CG 2026	Designated Person	\$25 <sup>[CD18]</sup>
CG 2027	Co-Owner of Premises	Included
CG 2028	Lessor of Leased Equipment	\$50
CG 2029	Grantor of Franchise	\$100
CG 2036	Grantor of Licenses	Included
L 723 <sup>[CD19]</sup>	Blanket Additional Insured	\$100

**7. Additional Available Liability Coverages**

a. Employee Benefits Liability Coverage

- 1.) Description Of Employee Benefits Liability Coverage (L578)  
This endorsement may be attached to the Commercial General Liability Coverage Form to provide coverage against claims for damages because of the insured's negligent acts, errors or omissions committed in the administration of an employee benefit program.
2. Rating  
The charge is based on the number of employees. The charge applies per location. A \$1,500 deductible applies to each claim.

# of employees	25/50	100/200	300/600	500/1,000	1,000/2,000
1 – 5	\$ 50	\$ 60	\$ 75	\$ 85	\$100
6 - 20	\$ 75	\$100	\$125	\$150	\$175
21 - 50	\$100	\$125	\$150	\$200	\$250
51 - 100	\$250	\$325	\$400	\$500	\$600

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- b. Hired and Non-owned Auto Liability Coverage
- 1.) Description of coverage  
This endorsement provides both hired and non-owned auto coverage. Non-owned auto liability provides coverage for any auto that is not owned, borrowed or hired by the insured. Hired auto liability provides coverage for autos leased, hired or borrowed by the insured. This endorsement is not available to insureds that have a policy covering other commercial automobile exposures.
  - 2.) Premium Determination  
See [state exception pages](#) to determine availability and rates.
- c. Aggregate limit applicable on a per-location basis  
Form CG2504  
Charge \$250 Flat
- d. Waiver of Transfer of Rights of Recovery Against Others To Us

Form	Charge
CG 2404	\$50 Flat (per person or organization)

- e. Molestation and Abuse Coverage - available for Allied Health classes [only](#)<sup>[CD20]</sup>

- 1) For Policies with One Professional Only:

This coverage is not available. The L-622 Molestation or Abuse Exclusion shall be attached to the policy. A -10% credit shall be applied against the General Liability premium after the coverage minimum premium check.

- 2) For Policies with Greater than One Professional:

- a) Limits of \$50,000 Per Occurrence/\$100,000 Aggregate are included at no additional charge.

- b) Optional Increased Limits

Calculated Premium = Maximum of [Base rate x hazard tier factor x number of professionals x limit factor, Coverage Minimum Premium]

Exposure basis: Number of Professionals

\$100K/\$300K Base Rate per Professional: \$20.00

Limit	Factor	Coverage Min. Prem.
\$100,000/\$300,000	1.000	\$100
\$300,000/\$300,000	1.198	\$200

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Limit	Factor	Coverage Min. Prem.
\$500,000/\$500,000	1.297	\$300
\$500,000/\$1,000,000	1.386	\$350
\$1,000,000/\$1,000,000	1.416	\$450
\$1,000,000/\$2,000,000	1.436	\$600
\$1,000,000/\$3,000,000	1.455	\$750

Hazard Tier	Tier Definition	Factor
LOW	Low hazard classes include therapy/counseling classes that do not work with minors; service classes that do not provide waxing and/or massage services; and do not include home health aides providing bathing and/or hygiene services. Additionally, the following classes are considered low hazard: Dietician/Nutritionist, Dental Assistant or Hygienist, EEG Technician, First Aid/CPR Training Services, Home Health Educator, Lactation Consultant, Medical Office Assistant or Administrative Assistant, Optician, Optometric Assistant, and Patient Intake Technician.	1.00
AVERAGE	Average hazard classes include therapy/counseling classes that work with minors on a supervised basis; service classes that do not provide waxing and/or massage services; and home health aides providing bathing and/or hygiene services. Additionally, the following classes are considered average hazard: Social Worker, Personal Trainer/Fitness Instructor, Physical Therapist or Aide, Occupational Therapist or Aide, Corrective Therapist, Rehabilitation Therapist, Polysomnographic Technologist, and Phlebotomist.	2.00
HIGH	High hazard classes include therapy/counseling classes that work with minors on a non-supervised basis; service classes that do provide waxing and/or massage services; and pastoral counselors. In addition, any class with 1 on 1 off-site interaction with children is considered high hazard.	5.00

- c) L 703 Molestation or Abuse Insurance Endorsement shall be attached to the policy.

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**D. PROPERTY**

These Property rates/rules are available for Allied Health and Medical Providers Office Package policies. Any exceptions are noted below.

**1. Definitions - Property**

**a. Construction**

The following definitions apply to all causes of loss other than Earthquake:

**1.) Frame (Code 1)**

Buildings where the exterior walls are wood or other combustible materials including construction where combustible materials are combined with other materials such as brick veneer, stone veneer, wood iron-clad, stucco on wood.

**2.) Joisted Masonry (Code 2)**

Buildings where the exterior walls are constructed of masonry materials such as adobe, brick, concrete, gypsum block, hollow concrete block, stone, tile or similar materials and where the floors and roof are combustible.

**3.) Non-Combustible (Code 3)**

Buildings where the exterior walls and the floors and roof are constructed of, and supported by metal, asbestos, gypsum or other non-combustible materials.

**4.) Masonry Non-Combustible (Code 4)**

Buildings where the exterior walls are constructed of masonry materials as described in Code 2, with the floors and roof of metal or other non-combustible materials.

**5.) Modified Fire Resistive (Code 5)**

Buildings where the exterior walls and the floors and roof are constructed of masonry or fire resistive material with a fire resistance rating of one hour or more but less than two hours.

**6.) Fire Resistive (Code 6)**

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Buildings where the exterior walls and the floors and roof are constructed of masonry or fire resistive materials having a fire resistance rating of not less than two hours.

b. Location

1.) Definition

For property damage rating, a location is defined as each separately rated, non-communicating building or structure.

c. Occupancy

Rating is based on the occupancy having the highest base rate

d. Protection class

ISO protection class assignments will apply. See Addendum.

**2. Rates - Property**

a. Rating Basis

Unless otherwise specified, all rates are for each \$100 of insurance and are annual rates. The following rates for buildings and business personal property are at 80% coinsurance and \$1,000 deductible:

1.) Office base rates

Buildings	Basic	Broad	Special
Frame	.42	.46	.49
Joisted Masonry	.39	.43	.46
Non Combustible	.39	.43	.46
Masonry Non Combustible	.29	.33	.34
Mod. Fire Resistive/ Fire Resistive	.25	.28	.29
Business Personal Property	Basic	Broad	Special
Frame	.49	.54	.56
Joisted Masonry	.46	.51	.53
Non Combustible	.46	.51	.53
Masonry Non Combustible	.34	.37	.39
Mod. Fire Resistive/ Fire Resistive	.29	.33	.34

2.) Bar and Tavern without Cooking or Fast Food restaurant base rates

Buildings	Basic	Broad	Special
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Frame	.93	1.02	1.06
Joisted Masonry	.82	.90	.94
Non Combustible	.72	.79	.82
Masonry Non Combustible	.55	.61	.63
Mod. Fire Resistive/ Fire Resistive	.45	.49	.51
Business Personal Property	Basic	Broad	Special
Frame	.98	1.08	1.13
Joisted Masonry	.87	.96	1.00
Non Combustible	.75	.82	.86
Masonry Non Combustible	.58	.64	.67
Mod. Fire Resistive/ Fire Resistive	.51	.56	.59

- 3.) Bar, Tavern with cooking (food sales <= 25% of annual sales) or convenience, delicatessen or grocery store with cooking base rates

Buildings	Basic	Broad	Special
Frame	1.03	1.13	1.19
Joisted Masonry	.91	1.00	1.05
Non Combustible	.78	.85	.90
Masonry Non Combustible	.61	.66	.70
Mod. Fire Resistive/ Fire Resistive	.49	.54	.57
Business Personal Property	Basic	Broad	Special
Frame	1.13	1.24	1.30
Joisted Masonry	1.00	1.10	1.15
Non Combustible	.86	.94	.99
Masonry Non Combustible	.67	.73	.77
Mod. Fire Resistive/ Fire Resistive	.58	.64	.67

- 4.) Bar, Tavern, Nightclub, Comedy club or Restaurant with cooking (food sales 26% or more of annual sales) base rates

Buildings	Basic	Broad	Special
Frame	1.21	1.33	1.40
Joisted Masonry	1.07	1.17	1.23
Non Combustible	.92	1.01	1.06
Masonry Non Combustible	.71	.78	.82
Mod. Fire Resistive/ Fire Resistive	.58	.64	.67
Business Personal Property	Basic	Broad	Special
Frame	1.33	1.46	1.54
Joisted Masonry	1.17	1.29	1.36

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Non Combustible	1.01	1.11	1.17
Masonry Non Combustible	.79	.86	.91
Mod. Fire Resistive/ Fire Resistive	.69	.76	.80

5.) Habitational base rates

Buildings	Basic	Broad	Special
Frame	1.27	1.34	1.38
Joisted Masonry	1.10	1.17	1.20
Non Combustible	1.03	1.09	1.12
Masonry Non Combustible	.90	.95	.98
Mod. Fire Resistive/ Fire Resistive	.67	.71	.73
Business Personal Property	Basic	Broad	Special
Frame	1.27	1.34	1.43
Joisted Masonry	1.13	1.19	1.27
Non Combustible	1.00	1.06	1.13
Masonry Non Combustible	.88	.93	.99
Mod. Fire Resistive/ Fire Resistive	.79	.83	.89

6.) Mercantile base rates (except Convenience, Deli and Grocery stores)

Buildings	Basic	Broad	Special
Frame	.67	.74	.77
Joisted Masonry	.58	.64	.67
Non Combustible	.48	.53	.55
Masonry Non Combustible	.42	.46	.48
Mod. Fire Resistive/ Fire Resistive	.32	.36	.37
Business Personal Property	Basic	Broad	Special
Frame	.70	.77	.81
Joisted Masonry	.67	.73	.77
Non Combustible	.49	.54	.57
Masonry Non Combustible	.42	.47	.49
Mod. Fire Resistive/ Fire Resistive	.39	.43	.45

7.) Convenience, Deli and Grocery Store without cooking base rates

Buildings	Basic	Broad	Special
Frame	.78	.86	.90
Joisted Masonry	.70	.77	.81
Non Combustible	.55	.61	.64
Masonry Non Combustible	.49	.54	.56

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Mod. Fire Resistive/ Fire Resistive	.37	.41	.43
Business Personal Property	Basic	Broad	Special
Frame	.90	.99	1.14
Joisted Masonry	.81	.89	1.02
Non Combustible	.63	.69	.80
Masonry Non Combustible	.54	.59	.68
Mod. Fire Resistive/ Fire Resistive	.51	.56	.64

- 8.) Parking Garage base rates (except Attendant Booths)  
We are offering rates for construction types listed below:

Buildings	Basic	Broad	Special
Masonry Non Combustible	.29	.33	.34
Mod. Fire Resistive/Fire Resistive	.25	.28	.29
Business Personal Property	Basic	Broad	Special
Masonry Non Combustible	.34	.37	.39
Mod. Fire Resistive/Fire Resistive	.29	.33	.34

- 9.) All Other base rates and Attendant Booths in Parking Garages

Buildings	Basic	Broad	Special
Frame	.90	.99	1.04
Joisted Masonry	.75	.83	.87
Non Combustible	.67	.73	.77
Masonry Non Combustible	.61	.67	.70
Mod. Fire Resistive/ Fire Resistive	.45	.50	.52
Business Personal Property	Basic	Broad	Special
Frame	1.04	1.16	1.21
Joisted Masonry	.89	1.00	1.04
Non Combustible	.74	.82	.86
Masonry Non Combustible	.64	.72	.75
Mod. Fire Resistive/ Fire Resistive	.61	.68	.71

- b. Percentage Wind Deductible:  
For 1% - Multiply above rates by .98  
For 2% - Multiply above rates by .97  
For 5% - Multiply above rates by .96
- c. Protection class surcharge  
- 7 & 8 apply a factor of 1.20  
- 9 & 10 apply a factor of 1.75

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- d. Coinsurance  
Multiply the 80% coinsurance building or personal property rate by the following factors to convert the 80% rate to 90% or 100% coinsurance.

100%	.90
90%	.95

- e. Deductible Options  
All property rates for buildings and personal property contemplate a minimum deductible of \$1,000. Apply the following factor for optional deductibles:

Deductible	Factor
\$1,000	1.00
\$2,500	0.95
\$5,000	0.90
\$10,000	0.85
\$25,000	0.80

- f. Amount of Insurance Credit  
Total Insured Value (TIV) = All Property Coverages at One Location.

If TIV > \$500,000, determine the Amount of Insurance Credit as follows:

$$\text{Credit} = 40\% \times [(TIV - \$500,000) / TIV]$$

Example: If TIV = \$1,000,000

$$\begin{aligned} \text{Credit} &= 40\% \times [(\$1,000,000 - \$500,000) / \$1,000,000] \\ &= 40\% \times (\$500,000 / \$1,000,000) \\ &= 40\% \times .5 \\ &= 20\% \end{aligned}$$

- g. Sprinkler Credit  
1. Applicable to properties that are fully protected by an operational sprinkler system covering 100% of the premises.  
a.) Multiply 80% Coinsurance rate by the applicable factor from the following table for risks in protection classes 1-8.

Construction (Code)	Buildings	BPP
Frame (1)	0.70	0.85
Joisted Masonry (2)	0.75	0.85
Non-Combustible (3)	0.77	0.85
Masonry Non-Combustible (4)	0.81	0.85
Modified Fire- Resistive (5) and Fire-Resistive (6)	0.84	0.85

- h. Building and Occupancy Characteristic Adjustments

1. For buildings 15 years old or less (date originally built), apply a .90 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).

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2. If the roof age is 5 years old or less, not flat, and the building age is 16 years or more, apply a .95 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).
3. If the risk has been in business at the insured location for 5 years or more, apply a .95 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).
4. If the risk has been in business at the insured location for three years or less, apply 1.10 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).

**4. Building Valuation Rule**

- a. When building coverage is provided, the building valuation is calculated as follows:
  - 1.) Step 1: Calculate the replacement cost of the building using our Value Factor Estimator:
    - a) Replacement Cost:  
To calculate the 100% estimated replacement cost, multiply the per square foot cost listed in the Construction Cost table times the appropriate Territorial Multiplier times the area of the building. (See [state exception page](#) for territorial multiplier)
    - b) Functional Replacement Cost:  
Functional replacement cost will be computed on the basis of replacement cost values. Refer to Replacement Cost above.
    - c) Actual Cash Value:  
Actual Cash Value will be computed on the basis of actual cash value and our depreciation table. To calculate the 100% estimated actual cash value, multiply the per square foot cost listed in the Construction Cost Table times (1.00-the appropriate depreciation factor) listed in the Depreciation Table times the appropriate Territorial Multiplier times the area of the building.
  - 2.) Step 2: Determine the following ratio: limit requested/valuation requested.
  - 3.) Step 3: Apply the applicable factor from the Building Value Factor Table to adjust for inadequately or over-insured buildings.
- b. Construction Cost-dollars per square foot:

Building Occupancy	Frame	JM	NC	MNC	MFR	FR
Apartments (3 stories or less)	72	75	77	85	88	87
Apartments (4 or more stories)	87	92	-	103	107	105
Mercantile with apartments (3 stories or less)	79	81	84	91	95	94
Mercantile with apartments (4 or more stories)	94	96	-	109	112	110
Bar with cooking	87	94	91	103	109	111

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Building Occupancy	Frame	JM	NC	MNC	MFR	FR
Convenience Market	75	83	77	84	105	100
Child Care	69	73	73	77	85	87
Office (3 stories or less)/Medical Clinic/Funeral Home/Veterinary Clinic	80	88	84	85	113	108
Office (4 or more stories)	92	100	95	96	127	122
Restaurant – Fast Food	115	125	119	128	160	154
Restaurant (Not Fast Food) Tavern or Bar with cooking	97	107	100	108	135	130
School	87	89	91	97	103	105
Shopping Center – Neighborhood Strip	68	72	71	76	83	86
Store – Retail	85	94	87	95	119	113
Warehouse	44	48	46	50	62	59
Church	110	117	113	122	133	132
Fitness Center/Club House/Recreation Building	79	85	86	95	99	95
Furniture Warehouse/Showroom/Wholesaler	52	55	53	60	68	67
Cinema or Theater	64	70	71	76	85	83
Indoor Tennis Club/Racquet Club	63	67	68	75	80	80
Indoor Ice or Roller Skating Rink	48	53	50	58	66	65
Nursing Home/Convalescent Center	99	103	106	109	115	116
Auto Repair/Service Center/Car Wash	66	72	65	77	86	86
Parking Garage	32	33	33	37	38	38

c. Risk factors that increase cost of construction calculation.

Occupancy	Elevators	Partially Sprinklered	100% Sprinklered
Apartment (3 stories or less)	2.110	1.230	2.450
Apartment (4 or more stories)	8.240	1.030	2.060
Bar with no cooking	1.770	1.240	2.480
Convenience Market	2.350	1.240	2.470
Mercantile with Apartment (3 stories or less)	2.350	1.380	2.750
Mercantile with Apartment (4 or more stories)	2.350	1.380	2.750
Office (3 stories or less)	2.110	0.780	1.550
Office (4 or more stories)	2.110	0.750	1.500
Restaurant (Not Fast Food) Tavern or Bar with cooking	1.770	1.240	2.480

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Restaurant - Fast Food	1.770	1.400	2.790
School	2.110	0.780	1.550
Shopping Center - Neighborhood Strip	2.350	1.110	2.220
Store - Retail	2.350	1.890	3.780
Warehouse	2.350	1.790	3.580
(Other)	2.110	1.240	2.480

d. ACV Depreciation Table

Building Age	Construction					
	Frame	JM	NC	MNC	MFR	FR
1	1%	1%	1%	1%	1%	1%
2	2%	25	25	2%	2%	1%
3	3%	3%	3%	3%	3%	2%
4	4%	4%	4%	4%	4%	3%
5-6	7%	7%	7%	7%	7%	5%
7	11%	11%	11%	11%	11%	6%
8-9	12%	12%	12%	12%	12%	8%
10	14%	13%	14%	13%	13%	9%
11	14%	13%	14%	13%	13%	10%
12-13	15%	14%	15%	14%	14%	11%
14	16%	15%	16%	15%	15%	12%
15	18%	15%	18%	15%	15%	13%
16	18%	17%	18%	17%	17%	14%
17	19%	17%	19%	17%	17%	14%
18	20%	18%	20%	18%	18%	15%
19	20%	19%	20%	19%	19%	16%
20	20%	20%	20%	20%	20%	16%
21	23%	21%	23%	21%	21%	17%
22	24%	21%	24%	21%	21%	18%
23	24%	23%	24%	23%	23%	19%
24	27%	23%	27%	23%	23%	19%
25	28%	24%	28%	24%	24%	19%
26	29%	25%	29%	25%	25%	21%
27	30%	26%	30%	26%	26%	21%
28	31%	27%	31%	27%	27%	22%
29	32%	27%	32%	27%	27%	23%
30	34%	28%	34%	28%	28%	25%
31	35%	29%	35%	29%	29%	26%
32	36%	30%	365	305	30%	27%
33	37%	31%	37%	31%	31%	28%
34	38%	32%	38%	32%	32%	29%
35	39%	33%	39%	33%	33%	30%
36	40%	34%	40%	34%	34%	31%
37	41%	35%	41%	35%	35%	32%
38	42%	36%	42%	36%	36%	33%
39	43%	37%	43%	37%	37%	34%

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Building Age	Construction					
	Frame	JM	NC	MNC	MFR	FR
40	44%	38%	44%	38%	38%	35%
41	45%	39%	45%	39%	39%	36%
42	46%	40%	46%	40%	40%	37%
43	47%	41%	47%	41%	41%	38%
44	48%	42%	48%	42%	42%	39%
45	49%	43%	49%	43%	43%	40%
46	50%	44%	50%	44%	44%	41%
47	50%	45%	50%	45%	45%	42%
48	50%	46%	50%	46%	46%	43%
49	50%	47%	50%	47%	47%	44%
50	50%	48%	50%	48%	48%	45%
51	50%	49%	50%	49%	49%	46%
52	50%	50%	50%	50%	50%	47%
53	50%	50%	50%	50%	50%	48%
54	50%	50%	50%	50%	50%	49%
55 and older	50%	50%	50%	50%	50%	50%

e. Building Value Factor Table (not applicable to vacant buildings)

% of Value	factor	% of Value	factor
30-39%	1.40	80-119%	1.00
40-49%	1.30	120-129%	.90
50-59%	1.20	130-139%	.85
60-69%	1.15	140-149%	.80
70-79%	1.10	150% & over	.75

f. Vacant Building Value Factor

If the existing structure values are \$20 or less per square foot, apply a 1.20 factor.  
Otherwise, apply a factor of 1.00

**5. Tenants Improvements and Betterments**

a. Explanation

Improvements and betterments are improvements to real property. They are of a permanent nature, such as a new storefront, decorations, partitions or elevators. The improvements and betterments are either installed or acquired by the tenant but are not legally removable by the tenant.

This coverage protects a tenant's use interest in improvements and betterments, which may be damaged or destroyed by a covered cause of loss.

b. Rates – use the applicable business personal property rate.

**6. Building and Personal Property Coverage Options**

a. Ordinance or Law Coverage

1.) Description of Coverage

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The following coverages respond to losses that result from enforcement of ordinances or laws regulating demolition and/or restoration of a building following physical damage to that building by a covered cause of loss. In the situation where the underlying property damage losses were caused by covered and excluded causes of loss, loss payment for ordinance or law coverages may be proportioned accordingly. Coverage does not include loss due to an ordinance or law with which the insured was required to comply before loss and failed to comply. Further, coverage applies only in response to the minimum requirements of an ordinance or law.

- a.) **Coverage A – Loss to the Undamaged Portion of the Building**  
The undamaged portion of a building will suffer a loss in value if an ordinance or law requires demolition following direct physical loss to another part of the building. Coverage A covers the loss in value of the undamaged portion of the building. (Coverage A does not cover the demolition costs. For such coverage, refer to Coverage B.)
  - b.) **Coverage B – Demolition Cost**  
Coverage B covers the costs to demolish the undamaged portions of the building.
  - c.) **Coverage C – Increased Cost of Construction**
    - (1) Following a physical loss to the building, Coverage C covers the increased expenses to repair, replace, reconstruct or remodel the damaged or undamaged parts of that building so that it complies with current building, zoning or land use laws or ordinances.
- 2.) **Coinsurance**
- a.) Minimum coinsurance of 80% applies to the building when Endorsement CP 04 05 is used. If the policy's Replacement Cost Optional Coverage applies (whether or not Coverage C also applies), this coinsurance requirement is based on the replacement cost of the current building. If the Replacement Cost Optional Coverage does not apply to the building, the coinsurance requirement is based on the actual cash value of the current building.
  - b.) The Coinsurance condition does not apply to the limit(s) of insurance selected for Coverages B and C.
- 3.) **Replacement Cost Coverage**  
When Coverage C applies to a building, activate the Replacement Cost Coverage of the underlying property damage coverage form, for that building. The Replacement Cost Coverage is activated by entry in the Declarations of the policy.
- 4.) **Rates**
- a.) **Coverage A – Loss to the undamaged portion of the building**  
Multiply the 80% or higher coinsurance building rates by 1.15 for each covered cause of loss. The resulting rates are the rates for Building Coverage including Coverage A.

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- b.) Coverage B – Demolition Cost Coverage  
Use the 80% coinsurance building rates. Multiply the rates by the limit of insurance in hundreds for Demolition Cost Coverage to obtain the additional premium for each covered cause of loss.
  - c.) Coverage C – Increased Cost Of Construction Coverage  
Use the 80% coinsurance building rates. Multiply the rates by the limit of insurance in hundreds for Increased Cost of Construction to obtain the additional premium for each covered cause of loss.
- b. Vacancy  
Use Vacancy Permit Endorsement CP 04 50.
  - 1.) Rules  
With respect to a policy issued to the owner or general lessee of a building, the building is considered vacant unless at least 31% of its total square footage is:
    - a.) Rented to a lessee or sub-lessee and used by the lessee or sub-lessee to conduct its customary operations; and/or Used by the building owner to conduct customary operations.
- c. Functional Building Valuation  
Functional Building Valuation Endorsement CP 109 provides coverage for specifically scheduled buildings which can be replaced with similar property that performs the same function as currently used but that is less costly.
- d. Utility Services Coverage – Power Outage  
Coverage for loss of or damage to Business Personal Property caused by an interruption in Power Supply Services to the described premises, resulting from direct physical loss or damage by a Covered Cause of Loss, is available. Use form CP149 Business Personal Property Utility Services Coverage – Power Outage.  
Charge \$.75[CD21] per \$100 of Limit  
Deductible is equal to the property deductible; coverage is not applicable until Power Supply Services have been interrupted for more than 4 hours.
- e. Equipment Breakdown Coverage  
Apply the flat charge based upon the total property limits of the risk. Rate each location separately. Do not interpolate premium between limits shown. Use the next higher limit premium (i.e. if total property limits are \$105,000 apply premium of \$109). Rates are per location.  
  
\$1,000 maximum deductible applies (if a lower deductible is selected for building or contents, the lower deductible will also apply to Equipment Breakdown).  
  
Applicable forms: CP110 (Basic Cause of Loss), CP111 (Broad Cause of Loss) or CP112 (Special Cause of Loss)

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Total Insurable Values up to	Premium	Total Insurable Values up to	Premium
\$50,000	55	\$1,600,000	451
\$60,000	64	\$1,700,000	460
\$70,000	73	\$1,800,000	469
\$80,000	82	\$1,900,000	478
\$90,000	91	\$2,000,000	487
\$100,000	100	\$2,100,000	496
\$110,000	109	\$2,200,000	505
\$120,000	118	\$2,300,000	514
\$130,000	127	\$2,400,000	523
\$140,000	136	\$2,500,000	532
\$150,000	145	\$2,600,000	541
\$160,000	154	\$2,700,000	550
\$170,000	163	\$2,800,000	559
\$180,000	172	\$2,900,000	568
\$190,000	181	\$3,000,000	577
\$200,000	190	\$3,100,000	586
\$220,000	199	\$3,200,000	595
\$240,000	208	\$3,300,000	604
\$260,000	217	\$3,400,000	613
\$280,000	226	\$3,500,000	622
\$300,000	235	\$3,600,000	631
\$325,000	244	\$3,700,000	640
\$350,000	253	\$3,800,000	649
\$375,000	262	\$3,900,000	658
\$400,000	271	\$4,000,000	667
\$425,000	280	\$4,100,000	676
\$450,000	289	\$4,200,000	685
\$475,000	298	\$4,300,000	694
\$500,000	307	\$4,400,000	703
\$550,000	316	\$4,500,000	712
\$600,000	325	\$4,600,000	721
\$650,000	334	\$4,700,000	730
\$700,000	343	\$4,800,000	739
\$750,000	352	\$4,900,000	748
\$800,000	361	\$5,000,000	757
\$850,000	370	\$5,250,000	766
\$900,000	379	\$5,500,000	775
\$950,000	388	\$5,750,000	784
\$1,000,000	397	\$6,000,000	793
\$1,100,000	406	\$6,250,000	802
\$1,200,000	415	\$6,500,000	811
\$1,300,000	424	\$6,750,000	820
\$1,400,000	433	\$7,000,000	829
\$1,500,000	442		

**7. Business Income and Extra Expense Coverage Options**

These coverage options are contained in Form CP 00 30 and Form CP 00 32.

a. Coinsurance Option

Factors are applicable to the 80% coinsurance building rates.

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Coinsurance %	W/ Extra Expense	W/O Extra Expense
100	.59	.54
90	.65	.59
80	.69	.63
70	.75	.68
60	.79	.72
50	.89	.81
No Coinsurance	2.28	2.08

b. Monthly Limitation Option

One Third	1.40
One Quarter	1.25
One Sixth	1.05

c. Extended Period of Indemnity

1.) Description of Coverage

The Extended Business Income additional coverage of Form CP 00 30 and Form CP 00 32 may be extended to cover additional loss of Business Income beyond 30 days by activating this Optional Coverage on the Declarations.

2.) Ineligibility

Do not use this optional coverage when the Maximum Period of Indemnity coverage option is applicable or the No-Coinsurance option is applicable.

3.) Rate Modification

Multiply the Business Income Coverage rates otherwise applicable by the factors in Table 2. Extended Period Of Indemnity Rate Modification Factors depending on the number of days that the coverage is extended.

Number Of Days*	Factor
60	1.10
90	1.15
120	1.20
150	1.30
180	1.40
270	1.45
365	1.50
450	1.55
540	1.60
630	1.65
730	1.70
*Interpolation not permitted	

d. Maximum Period of Indemnity

1.) Description of Coverage

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This coverage option is contained in Form CP 00 30 and Form CP 00 32 and is activated by entry on the Declarations. Under this option, the coinsurance clause of Form CP 00 30 and Form CP 00 32 is suspended and coverage applies for a maximum indemnity period of four months.

2.) Rate Modification

Multiply the base rates by the appropriate factor below, Maximum Period of Indemnity Rate Modification Factors, representing the insured's principal business, to obtain the rate.

Factors	Business Income	
	With Extra Expense	Without Extra Expense
Mercantile/Non-Manufacturing Operations	1.35	1.26
Manufacturing Operations	2.03	1.85
Rental Properties	1.04	0.95

e. Extra Expense Coverage Form

1.) Description Of Coverage

Extra Expense Insurance covers the necessary additional expenses undertaken to:

- a.) Avoid or minimize the interruption of business by continuing business operations, whether at the described premises or elsewhere; or
- b.) Minimize the interruption of business if the insured cannot continue business operations.

2.) Basic Form

Use Extra Expense Coverage Form CP 00 50 .

3.) Rules

a.) Coverage

Extra Expense Insurance may be written as a separate policy or as a separate item with direct property damage in one policy.

b.) Base Rate

Whenever the term "base rate" is used in the rules, it means the 80% coinsurance building rate.

c.) Coinsurance

There are no coinsurance provisions. Recovery is limited as shown on the Declarations to specified percentages times the limit of insurance, as follows:

The first percentage shown when the period of restoration is not in excess of 30 days;

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The second percentage shown when the period of restoration is in excess of 30 days but not in excess of 60 days; or

The third percentage shown when the period of restoration is in excess of 60 days.

d.) **Blanket Insurance**

Do not write insurance on a blanket basis covering more than one location or site. Insurance may be written to cover groups of buildings occupied by an insured as one operational unit at one site.

e.) **Rate Modification**

1.) Multiply the base rates by the appropriate factor below to obtain the extra expense rate.

Limits On Loss Payment	Factor
100%-100%-100%	4.00
40%- 80%-100	2.00
35%- 70%-100	1.90

**8. Causes of Loss – Basic Form**

a. **Description Of Covered Causes Of Loss**

This form provides coverages for the causes of loss of fire, lightning, explosion, windstorm or hail, smoke, aircraft or vehicles, riot or civil commotion, vandalism, sprinkler leakage, sinkhole collapse and volcanic action.

b. **Forms**

1.) Use Causes of Loss – Basic Form CP 10 10.

c. **Rules**

1.) We will use the fully developed class rates shown by class code in the rates section of this filing.

d. **Sprinklered Risks**

1.) **Description of Coverage**

Sprinkler Leakage is a Covered Cause of Loss under the Basic, Broad and Special Causes of Loss Forms. Coverage is provided automatically unless the Sprinkler Leakage Exclusion of the Additional Exclusions Endorsement CP 10 56 is shown to apply to the described property.

2.) **Definition of Automatic Sprinkler System**

a.) Any automatic fire protective or extinguishing system, including connected:

- (i.) Sprinklers and discharge nozzles;
- (ii.) Ducts, pipes, valves, and fittings;
- (iii.) Tanks, their component parts, and supports; and
- (iv.) Pumps and private fire protection mains.

b.) When supplied from an automatic fire protective system:

- (i.) Non-automatic fire protective systems; and
- (ii.) Hydrants, standpipes, and outlets.

This definition includes cooking protection equipment.

e. **Vandalism**

Vandalism is a covered cause of loss under the Basic, Broad and Special Causes of Loss Forms. Coverage is provided automatically unless the

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Vandalism Exclusion of the Additional Exclusion Endorsement CP 10 55 is shown to apply to the described property

**9. Causes of Loss – Broad Form**

- a. Description Of Covered Causes Of Loss  
This form provides the same coverage as the Basic Causes of Loss Form CP 10 10 and includes the following additional causes of loss:
  - 1.) Falling objects;
  - 2.) Weight of snow, ice or sleet; and
  - 3.) Water damage.An Additional Coverage for Collapse is also included.
- b. Form  
Use Causes of Loss – Broad Form CP 10 20.
- c. Rules
  - 1.) Coinsurance
    - a.) Property Damage Coverage Except Builders' Risk  
The minimum coinsurance is 80%.
    - b.) Time Element Coverage  
The minimum coinsurance is 50%

**10. Causes of Loss – Special Form**

- a. Description Of Covered Causes Of Loss
  - 1.) The Causes of Loss – Special Form provides coverage for risks of direct physical loss unless excluded or limited to eligible property, subject to certain exclusions and conditions.
  - 2.) The Theft Exclusion may be used to exclude theft coverage on eligible building and personal property
  - 3.) The Watercraft Exclusion modifies coverage provided under the Causes of Loss – Special Form to exclude watercraft damage to the following types of property:
    - a.) Retaining walls that are not part of a building;
    - b.) Bulkheads; or
    - c.) Pilings, piers, wharves or docks.
- b. Forms
  - 1.) Use Causes Of Loss – Special Form CP 10 30.
  - 2.) Use Theft Exclusion Endorsement CP 10 33 to exclude theft coverage.
  - 3.) Use Watercraft Exclusion Endorsement CP 10 35 when coverage is provided on waterfront property using Form CP 10 30.
- c. Rules
  - 1.) Coinsurance
    - a.) Property Damage Other Than Builders' Risk  
The minimum coinsurance is 80%.
    - b.) Time Element Coverage  
The minimum coinsurance is 50%.
- d. Offices  
Values of property in offices may be written as a separate item under the Causes of Loss – Special Form and all remaining property may be written under the Causes of Loss – Basic or Broad Forms. Offices at one location may

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be written as a separate item from all other personal property, using the office rates.

**11. Other Causes of Loss Forms**

a. Additional Exclusions

1.) Explanation

One or more of the following causes of loss may be excluded from coverage under the Causes of Loss – Basic, Causes of Loss – Broad and Causes of Loss – Special Forms:

- a.) Windstorm or Hail;
- b.) Vandalism;
- c.) Sprinkler Leakage.
- d.) Water Damage, Sprinkler Leakage, Weight of Ice or Snow or Sleet
- e.) Theft

2.) Forms

- a.) Use Windstorm Or Hail Exclusion Endorsement CP 10 54 to exclude Windstorm or Hail.
- b.) Use Vandalism Exclusion Endorsement CP 10 55 to exclude Vandalism.
- c.) Use Sprinkler Leakage Exclusion Endorsement CP 10 56 to exclude sprinkler Leakage. CP 10 56 may be used for properties which have a sprinkler leakage exposure, whether these properties qualify for sprinklered (specific) rating or are non-sprinkler-rated. CP 10 56 may not be used on non-sprinkler-rated properties which do not have a sprinkler leakage exposure.
- d.) Use Water Damage, Sprinkler Leakage, Weight of Ice or Snow or Sleet Exclusion CP114 when excluding these causes of loss.
- e.) Use Theft Exclusion CP1033 to exclude theft coverage

3.) Rates and Rate Modifications

a.) Windstorm or Hail

When Windstorm or Hail is excluded, multiply the 80% coinsurance rate by the appropriate factor for the remaining causes of loss.

State	Windstorm or Hail Credit Factor
Alabama[A22]	.65
Connecticut, Delaware, Georgia, Massachusetts, Maryland, New Jersey, New York, North Carolina, Rhode Island, South Carolina & Virginia	.85
Mississippi, Texas and Florida – remainder	.70
Florida - Collier, Lee, Charlotte, Sarasota, Manatee, Hillsborough, Pasco, Hernando,	.60

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Citrus, Levy & Dixie counties	
Florida – Dade, Broward, Palm Beach counties	.65
Florida – Florida Keys	.30
Remainder of Country	.95

- b.) Vandalism  
Multiply the rates shown in the rates section by .99 to exclude vandalism.
- c.) Water Damage, Sprinkler Leakage, Weight of Snow, Ice or Sleet  
Multiply the rates shown in the rates section by .97 to exclude water damage, sprinkler leakage, weight of snow, ice or sleet
- d.) Theft  
Multiply the rates shown in the rates section by .90 to exclude theft

**12. Windstorm Or Hail Percentage Deductibles**

- a. Description
  - 1.) Percentage Deductibles  
The following deductibles may be used for the Windstorm or Hail cause of loss:
    - a.) 1% Deductible
    - b.) 2% Deductible
    - c.) 5% Deductible
  - 2.) Specific Insurance  
The dollar amount of the deductible will be equal to 1%, 2% or 5% of the Limit(s) of Insurance applicable to the property that has sustained loss or damage.
  - 3.) Blanket Insurance  
The dollar amount of the deductible will be equal to 1%, 2% or 5% of the value(s) of the property that has sustained loss or damage. The value(s) to be used are those shown in the most recent Statement of Values on file with the company.
  - 4.) Value Reporting Forms And Builders Risk Insurance  
For value reporting forms, the calculation of the deductible amount is based on reported values. There are variations for the situation where loss occurs prior to the first report, and for reports of value which show less than full values. If coverage is written blanket under a reporting form, the basis of the calculation is value at time of loss.  
For builders risk insurance, the calculation of the deductible amount is based on value at time of loss.
- b. Form  
Use Windstorm Or Hail Percentage Deductible Form CP 03 21.
- c. Rules
  - 1.) The Windstorm or Hail percentage deductibles apply whenever there is an occurrence of Windstorm or Hail.
  - 2.) The Windstorm or Hail deductible is calculated separately for, and applies separately to:

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- a.) Each building, if two or more buildings sustain loss or damage;
  - b.) The building and to personal property in that building, if both sustain loss or damage;
  - c.) Personal property at each building, if personal property at two or more buildings sustains loss or damage;
  - d.) Personal property in the open.
- 3.) The Statement of Values for a blanket policy should contain sufficient detail – value of each building, value of personal property at each building, value of personal property in the open – to complement the procedure set forth in the Windstorm or Hail Percentage Deductible endorsement.
- 4.) Percentage deductibles may vary by location. At a location all covered property must be written using the same percentage deductible.
- 5.) If some property at a location is written under a blanket limit of insurance and other property at the same location is written under a specific limit of insurance, all covered property at that location must be written using the same percentage deductible.
- When property is covered under the Coverage Extension for Newly Acquired or Constructed Property: In determining the amount, if any, that we will pay for loss or damage, we will deduct an amount equal to a percentage of the value(s) of the property at time of loss. The applicable percentage for Newly Acquired or Constructed Property is the highest percentage shown in the Schedule for any described premises.

**13. Sign Coverage**

Coverage is available for Outdoor signs which are the property of the insured or the property of others in the care, custody and control of the insured. Coverage will be added by using endorsement CP 1440 Outside Signs. Our standard property deductibles and deductible credits apply.

- a.) Premium Determination  
Sign Coverage \$3.00 per \$100 of value

**14. Glass Coverage**

Coverage is available for glass which is the property of the insured or where the tenant has a contractual responsibility for the glass.

- a.) Premium Determination
  - 1.) \$4.00 rate per linear foot for ordinary glass; or
  - 2.) \$1.00 per \$100 of value for glass with a specific dollar value.
  - 3.) Glass rates contemplate a minimum deductible of \$1,000.

Apply the following factor for optional deductibles:

Deductible	Factor
\$250	1.18

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\$500	1.12
\$1,000	1.00
\$2,500	0.80

**15. Value Plus and Value Endorsements**

The Value Plus (CP 108) and Value (CP131) endorsements can be added to accounts with Cause of Loss - Special form and Cause of Loss – Special form excluding theft. Use CP 108 when theft is included and CP 131 when theft is excluded. Premium is \$250 and applies per location.

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**Addendum: PUBLIC PROTECTION CLASSIFICATIONS (ISO)**

Public Protection Classifications are determined by using one of the following:

**A. Using Location<sup>(TM)</sup>:**

1. Location<sup>(TM)</sup> is a database that can be used to determine Public Protection Classifications for specific locations.
2. In the event that Location<sup>(TM)</sup> produces a split classification (e.g., in a 6/9 community where water source/hydrant information is not available) the classification number will be determined as follows:
  - a. If the risk address is within 1,000 feet of an approved water source, then the PPC to be assigned is the lower numbered class (e.g., Class 6 in the example above).
  - b. Otherwise the risk is assigned a PPC 9.

**B. Applying the following manual rules.**

**1. COMMUNITY MITIGATION CLASSIFICATIONS**

The most recent Insurance Services Office Community Mitigation Classification Manual may be used. The Community Mitigation Classification Manual includes:

- Jurisdictions name reflecting the name of the city, town, village, fire district, fire services areas or other classified areas.
- County in which the jurisdiction is located or notation that is an Independent City.
- Public Fire Protection Classification (PPC).
- Building Code Effectiveness Grading Classification (BCEGS).<sup>1</sup>

**2. CLASSIFICATION OF PUBLIC FIRE PROTECTION (PPC)**

- a. For jurisdictions listed with a single classification number, all properties listed within the jurisdiction should receive the listed classification number.
- b. For jurisdictions listed with multiple classification numbers (e.g. 6/9), known as a "split classification", the classification number applicable to individual properties is determined as follows:

**1) Split classification shown as "X/9" or "X/8B" (e.g. 6/9 or 6/8B):**

- a) For properties located five road miles or less from a responding fire station of a designated recognized fire department indicated in the listing for the jurisdiction, and within 1,000 feet of a fire hydrant, the first listed classification number applies (e.g. 6/9, use Class 6).
- b) For properties located five road miles or less from a responding fire station of a designated recognized fire department indicated in the listing for the

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<sup>1</sup> BCEGS is not currently used in our company's property rating.

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jurisdiction, and with a fire hydrant more than 1,000 feet, Class 9 or 8B applies.

c) For properties not qualifying for 1a) or 1b), Class 10 applies.

2) Split classifications displayed as "X/10" where no hydrants are installed (e.g. 9/10); or where hydrant distance does not apply due to an alternate creditable water supply (e.g. 7/10):

a) For properties located within five road miles or less (unless otherwise indicated in the designated recognized fire department indicated in the listing for the jurisdiction, the first listed classification applies ( e.g. 7/10, use class 7).

b) For properties not qualifying for 2a) above, Class 10 applies.

c. For jurisdictions or areas not listed, Class 10 applies.

d. Subscription fire departments are indicated by a footnote in the Community Mitigation Manual. Class 10 applies to individual properties that do not subscribe to the listed subscription fire department.

e. Communities with (\*\*) listed as the PPC refers to the footnotes for explanatory information.

f. If the line of insurance manual does not contain rating provisions for PPC 8B use PPC 9 for rating purposes.

g. For specifically rated commercial properties refer to the ISO Specific Property Information database for the applicable PPC.

h. Definitions:

1) "Recognized fire department" means a fire department meeting the minimum criteria of ISO's Fire Suppression Rating Schedule (FSRS).

2) "Primary fire department" means the fire department that has primary overall responsibility for the jurisdiction.

**3. CLASSIFICATION OF BUILDING CODE EFFECTIVENESS (BCEGS)**

Our company does not currently utilize BCEGS.

<b>State:</b>	District of Columbia	<b>Filing Company:</b>	United States Liability Insurance Company
<b>TOI/Sub-TOI:</b>	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
<b>Product Name:</b>	Specialty General Package		
<b>Project Name/Number:</b>	Rule Revision/ PROF-SGP-2016-114-Edit		

## Supporting Document Schedules

<b>Bypassed - Item:</b>	Consulting Authorization
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Actuarial Certification (P&C)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Comparison
<b>Comments:</b>	
<b>Attachment(s):</b>	CW SGP Package Rate and Rule Manual 11-09-2016 (INCLUDES PROPERTY) markup.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

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**This manual contains the rules, rates and rating procedures for Professional – Allied Health (E&O, GL and Property) and Professional – Medical Providers Office Package (GL and Property)**

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**A. GENERAL RULES**

All rules are designed to be utilized with rates. All references in the rules and examples to rates and/or premiums (including base premiums) shall be interpreted to mean those established by the individual insurance company.

**1. Product Options**

This product may be written in several ways as described below:

Professional Liability on a monoline basis

Professional Liability with General Liability

Professional Liability with General Liability and Property

Professional Liability with Property

No policy is to be written without the Professional Liability coverage part

**2. Multi-State Risks**

We do not have the ability to write multi-state risks in one policy. If an entity qualifying under this filing is written with a location in another state, combinable due to ownership, the insured will not be penalized from a premium standpoint due to the application of a Minimum Premium or other factors that would not normally apply if the locations could be written in one policy.

**3. Terrorism Coverage**

Coverage is available for Certified Acts of Terrorism per the Terrorism Risk Insurance Reauthorization Act.

See [state exception page](#) for charges.

**4. Incidental Occupancies**

Rates for other incidental occupancies may be used if filed in another admitted product<sup>[A1]</sup>.

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**B. PROFESSIONAL LIABILITY – ERRORS AND OMISSIONS**

The below rates/rules apply to the Allied Health Errors & Omissions product. Monoline Medical Providers EPL rates/rules are filed under separate cover.

**1. Premium Determination Rule**

- a. Eligible Classes for Professional Liability Coverage<sup>[A2]</sup>

Class	Description	Class	Description
73702	Art Therapist	73746	School Guidance Counselor
73704	Dance Therapist	73748	Social Worker
73706	Dental Assistant	73750	Speech Language Pathologist
73708	Dental Hygienist	73752	Wellness Counselor
73710	Dietician/Nutritionist	73754	X-Ray Technician
73712	Drama Therapist	73756	Athletic Trainer
73714	EEG Technician	73758	Corrective Therapist
73716	First Aid/CPR Training	73760	Rehabilitation Therapist
73718	Home Health Educator	73762	Physical Therapist
73720	Home Health Aide (non-medical)	73764	Physical Therapist Aide
73722	Horticultural Therapist	73766	Occupational Therapist
73724	Lactation Consultant	73768	Occupational Therapist Aide
73726	Medical Office Assistant	73770	Recreational Therapist
73728	Medical Office Administrative Assistant	73772	Pet Therapist
73730	Mental Health Counselor	73774	Massage Therapist
73732	Music Therapist	73776	Personal Trainer/Fitness Instructor
73734	Optician	73780	Beautician/Barber
73736	Optometric Assistant	73782	Nail Technician
73738	Pastoral Counselor <sup>1</sup>	73784	Cosmetologist
73740	Patient Intake Technician	73786	Aesthetician
73742	Phlebotomist	73788	Aromatherapist
73744	Polysomnographic Technologist		

- b. Follow these steps to determine premium:

- Step 1. Determine the rate by multiplying the number of full time equivalent professionals in each class by the base rate for each class, adding the results together for the limit chosen. For Home Health Aide class, the rate will change to \$100 per professional after the first three professionals
- Step 2. Multiply the result of Step 1 by the deductible factor
- Step 3. Multiply the result of Step 2 by the applicable state multiplier
- Step 4. Multiply the result of Step 3 by the Retroactive Date Factor

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- Step 5. The result of Step 4 is subject to a minimum premium  
Step 6. Multiply the result of Step 5 by the applicable Premium Modifiers  
Step 7. The result of Step 6 is subject to a minimum premium  
Step 8. Add the charges for optional coverages to the result of Step 6

## 2. Base Rates

No deductible applies.

	Rate Class					
Limit per incident/aggregate	I Minimum / Low Hazard	II Medium /Average Hazard	III Moderate Hazard	IV Moderate / High Hazard	V High Hazard	VI Very High Hazard
\$500,000/\$500,000	\$272	\$302	\$388	\$647	\$863	\$1,295
\$500,000/\$1,000,000	\$276	\$306	\$394	\$656	\$875	\$1,313
\$1,000,000/\$1,000,000	\$307	\$341	\$439	\$731	\$975	\$1,463
\$1,000,000/\$2,000,000	\$310	\$345	\$443	\$739	\$985	\$1,478
\$1,000,000/\$3,000,000	\$315	\$350	\$450	\$750	\$1,000	\$1,500
\$2,000,000/\$4,000,000 <sup>[CD3]</sup>	\$356	\$395	\$508	\$847	\$1,130	\$1,695
\$2,000,000/\$5,000,000	\$358	\$398	\$511	\$852	\$1,137	\$1,706
\$2,300,000/\$5,000,000	\$384	\$426	\$547	\$912	\$1,217	\$1,826
\$250,000,000/\$5,000,000	\$421	\$467	\$600	\$1,001	\$1,335	\$2,003

## 3. Premium Basis

The premium basis is the number of individuals working as professional service providers for the insured plus independent contractors employed by the insured for the provision of professional services, if AH 211 applies.

The premium basis is the number of individuals working as professional service providers for the insured plus 0.50 times the number of independent contractors employed by the insured for the provision of professional services, if AH 211 does not apply.

(Part time professional service providers are counted as 0.50.)

## 4. Deductible Factors

Deductible Amount	Factor
\$1,000	0.99
\$2,500	0.97
\$5,000	0.95
\$10,000	0.90

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\$15,000	0.85
\$25,000	0.80

## 5. Prior Acts Coverage

The Professional Liability base rates contemplate full prior acts coverage (1.00 step factor). Use the factors below when a retroactive date is elected.

Retroactive Date	Factor
Retro of inception of policy	.85
1 yr prior acts	.90
2 yrs prior acts	.95
3 or more years prior acts	1.00

## 6. State Multiplier

Refer to the [State Exception Pages](#)

## 7. Premium Modifiers

### a. Scheduled Rating

The schedule rating credit or debit will be equal to the sum of the selected credits or debits given for each individual risk characteristic shown in the table below, subject to a maximum sum of all credits or debits not exceeding 25%.

Characteristic	Range of credit/debit factors	
Nature of Operations	.75	1.25
Risk Management	.75	1.25
Owners/Partners/Officers Experience	.75	1.25

### b. Experience Rating

"None" No claims in past five years	.85	1.00
"Minimal" One or more claims reported in past five years with payment plus reserves less than \$10,000	1.00	1.25
"Material" One or more claims in past five years with payments plus reserves exceeding \$10,000	1.25	1.50

## 8. Minimum Premium Rule

\$500 policy minimum premium applies when there is more than one professional for coverage.

\$425 policy minimum premium applies when there is only one professional for coverage.

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**9. Optional Coverages**

a. Patient Molestation for Professional E&O

1) For Policies with One Professional only:

a) Limits of \$25,000/50,000 are included at no additional charge.

b) Optional Increased Limits

Defense coverage for Patient Molestation may be provided at a \$100,000/\$300,000 limit. This is a shared limit with the policy limits. The charge for this coverage is 10% of the Professional Premium subject to a minimum of \$100.

c) AH-212 Defense for Allegations of Patient Molestation Coverage  
Endorsement shall be attached to the policy.

2) For Policies with Greater than One Professional:

Patient Molestation Coverage is not available. The AH-226 Patient Molestation or Abuse Exclusion shall be attached to the policy. A -\$8.00 credit shall be applied against the Professional Liability premium.

b. Additional Insured

AH-201 – Additional Insured

Charge \$50 for the first AI added; no charge for additional entities added.

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**C. GENERAL LIABILITY**

These General Liability rates/rules are available for Allied Health and Medical Providers Office Package policies. Any exceptions are noted below.

**1. Company Rates<sup>[A4]</sup>**

**a. Categories**

The Commercial General Liability coverage is divided into two major categories for rating purposes:

- 1.) Premises/Operations; and
- 2.) Products/Completed Operations.

**b. Company GL Rates – Allied Health Professionals<sup>[A5]</sup>**

**1) Table assignment**

Table assignment will be based on the premises hazard at the insured location – risks with higher hazard premises, based on equipment and treatment facility features, will be assigned to table 2.

**2) Eligible Classes for General Liability Coverage<sup>[A6]</sup>**

**a) Allied Health**

<b>Class</b>	<b>Description</b>	<b>Class</b>	<b>Description</b>
73701	Art Therapist	73745	School Guidance Counselor
73703	Dance Therapist	73747	Social Worker
73705	Dental Assistant	73749	Speech Language Pathologist
73707	Dental Hygienist	73751	Wellness Counselor
73709	Dietician/Nutritionist	73753	X-Ray Technician
73711	Drama Therapist	73755	Athletic Trainer
73713	EEG Technician	73757	Corrective Therapist
73715	First Aid/CPR Training	73759	Rehabilitation Therapist
73717	Home Health Educator	73761	Physical Therapist
73719	Home Health Aide (non-medical)	73763	Physical Therapist Aide
73721	Horticultural Therapist	73765	Occupational Therapist
73723	Lactation Consultant	73767	Occupational Therapist Aide
73725	Medical Office Assistant	73769	Recreational Therapist
73727	Medical Office Administrative Assistant	73771	Pet Therapist
73729	Mental Health Counselor	73773	Massage Therapist
73731	Music Therapist	73775	Personal Trainer/Fitness Instructor
73733	Optician	73779	Beautician/Barber
73735	Optometric Assistant	73781	Nail Technician
73737	Pastoral Counselor <sup>1</sup>	73783	Cosmetologist
73739	Patient Intake Technician	73785	Aesthetician
73741	Phlebotomist	73787	Aromatherapist

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73743	Polysomnographic Technologist		
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<sup>1</sup> Independent Contractor with no religious institution affiliation.

b) Medical Providers Office [CD7]

Class	Description
76196	Acupuncturist
76197	Anesthesiology
76198	Chiropractor
76200	Clinics
76201	Dentist / Endodontist / Orthodontist
76202	Dermatologist
76203	Doctors
76204	Family / General Practice
76205	Hematology
76206	Internal Medicine / Specialist
76207	Internal Medicine
76208	Med Spas / Laser Therapy
76209	Nutritionist
76210	OB / GYN / Fertility Clinic
76211	Ophthalmologist)
76212	Optometrist / Optician
76213	Pediatrics
76214	Physical / Occupational Therapist
76215	Podiatry)
76216	Psychologist / Psychiatrist
76217	Sleep Disorder Center
76218	Surgeon - Oral / Maxillofacial
76219	Surgeon - Plastic (Cosmetic / Aesthetic)
76220	Surgeon - Plastic (Reconstruction)
76221	Surgeon - All Other)
76222	Surgery Centers - Ambulatory Cov. A

- 3) Rates apply per professional; rate each independent contractor to be covered at .50 times the rate per professional

Limit (\$1,000s)	Table 1	Table 2
500/500	\$27.62	\$75.94
500/1000	\$28.00	\$77.00
1000/1000	\$31.20	\$85.80

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1000/2000	\$31.52	\$86.68
1000/3000	\$32.00	\$88.00
2000/4000[CD8]	\$36.15	\$99.41
2000/5000	\$36.38	\$100.01
3000/5000	\$38.94	\$107.08
5000/5000	\$42.73	\$117.48

- 4) Apply state multiplier – see [state exception pages](#) for applicable factor.
- 5) Apply number of employees multiplier from the table below[CD9]:

Number of Employees	Factor
0 – 15 Employees	1.00
16 – 30 Employees	0.80
31 & up Employees	0.70

- 6) [Apply a minimum General Liability Premium of \\$150.\[PI10\]](#)
- 7) ISO Territory Definitions will apply.

c. **Basic Limits[A11]**

- 1) Company rates are shown at the following [limits\[A12\]](#):
  - a) Multiple limit options for each occurrence for bodily injury and property damage. Subject to this limit:
    - (1) \$100,000 for damage to premises rented to the insured
    - (2) \$5,000 per person for medical payments.
    - (3) Limit equal to the occurrence limit for per person or organization for personal and advertising [injury\[A13\]](#).
  - b) Multiple limit options provided under Paragraph a. are subject to either the General Aggregate Limit (for other than products/completed operations) or the Products/Completed Operations Aggregate Limit, whichever is applicable.
- 2) The Occurrence Limit applies to premises/ operations and products/completed operations.
- 3) The Aggregate Limits apply separately to each year of the policy or any applicable policy period less than 1 year (other than an extension of less than 1 year after the policy is issued).
- 4) The Aggregate Limits may be reinstated when exhausted.

d. **Increased Limits**

These factors contemplate that the limit for personal and advertising injury will be equal to the occurrence limit selected. The occurrence limit applies to premises/operations and products/completed operations; therefore, different occurrence limits cannot be selected. The basic damage to premises rented to you and medical payments limits do not increase with increases in other limits.

**2. Increased Limits Tables[A14]**

- a. Procedures
  - 1) All limits are expressed in thousands in dollars.

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2) State company rates are shown at all available limit options in Section C., Rule 1.b. above.

b. Increased Limits Table Assignments (ILTAs)  
Not applicable to this product as company rates are shown at all available limit options.

c. For higher limits Damage to Premises Rented to You, charge the following additional premium:

\$250,000	\$135.00
\$300,000	\$150.00
\$500,000	\$200.00
\$1,000,000	\$350.00

For limits of \$50,000, apply a credit of 1% to the premises operations premium.

d. For higher Medical Payments limits, charge the following additional premium:

\$10,000	\$200.00
\$25,000	\$400.00

For limits of \$1,000, apply a credit of 1% to the premises operations premium.

### 3. Coverage Exclusion Modifications

All "Premises/Operations Loss Costs" contain fringe loadings. The following chart provides the credit allowed for excluding one of these coverages. Modifications are applied to the final "Premises/Operations" rate only. Credit varies by class category.

Coverage	Mercantile (10000s), Professional Classes (70000s)	Miscellaneous (40000s)	Mfg/Processing (50000s)	Bldg & Premises (60000s)
Personal & Advertising Injury CG 2138	10%	10%	5%	10%
Medical Payments CG 2135	3%	2%	-	3%
Damage to premises rented CG 2145	2%	3%	5%	-
Contractual Liability Limitation CG 2139	5%	5%	10%	7%

### 4. Liability Deductible<sup>[A15]</sup>

\$0 Deductible Applies. No optional liability deductibles are available for this product.

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**5. Bases of Premium**

The basis used for determining the premium charge for each classification is indicated in the classification section of this Manual. The definitions of the bases of premium are as follows:

- a. **Admissions**  
The total number of persons, other than employees of the named insured, admitted to the event insured or to events conducted on the premises whether on paid admissions, tickets, complimentary tickets or passes.  
The rates apply per 1,000 admissions.
- b. **Area**  
The total number of square feet of floor space at the insured premises, computed as follows:
  - 1.) For entire buildings, by multiplying the product of the horizontal dimensions of the outside of the outer building walls by the number of floors.
  - 2.) For tenants, determine the area they occupy in the same manner as for entire buildings.
  - 3.) The rates apply per 1,000 square feet of area.
- c. **Each**  
This basis of premium involves units of exposure, and the quantity comprising each unit of exposure is indicated in the classification footnotes, such as "per person". For Allied Health Professionals, rates apply per Professional employee.
- d. **Gross Sales**
  - 1.) **Definition**  
The gross amount charged by the named insured, concessionaires of the named insured or by others trading under the insured's name for:
    - a.) All goods or products, sold or distributed;
    - b.) Operations performed during the policy period;
    - c.) Rentals; and
    - d.) Dues or fees.
  - 2.) **Inclusions**  
The following items shall not be deducted from gross sales:
    - a.) Foreign exchange discounts;
    - b.) Freight allowance to customers;
    - c.) Total sales of consigned goods and warehouse receipts;
    - d.) Trade or cash discounts;
    - e.) Bad debts; and
    - f.) Repossession of items sold on installments (amount actually collected).
  - 3.) **Exclusions**  
The following items shall be deducted from gross sales:
    - a.) Sales or excise taxes which are collected and submitted to a governmental division;
    - b.) Credits for repossessed merchandise and products returned. Allowances for damaged and spoiled goods;
    - c.) Finance charges for items sold on installments;

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- d.) Freight charges on sales if freight is charged as a separate item on customers invoice;
    - e.) Royalty income from patent rights or copyrights which are not product sales, and
    - f.) Rental receipts for products liability coverage only.
  - 4.) Application  
The rates apply per \$1,000 of Gross Sales.
- e. Payroll
  - 1.) Definition
    - a.) Payroll means remuneration.
    - b.) Remuneration means money or substitutes for money.
  - 2.) Inclusions  
Payroll includes the following items:
    - a.) Commissions;
    - b.) Bonuses;
    - c.) Extra pay for overtime work, except as provided in Paragraph E.4.;
    - d.) Pay for holidays, vacations or periods of sickness;
    - e.) Payment by an employer of amounts otherwise required by law to be paid by employees to statutory insurance or pension plans, such as the Federal Social Security Act;
    - f.) Payment to employees on any basis other than time worked, such as piecework, profit sharing or incentive plans;
    - g.) Payment or allowance for hand tools or power tools used by hand provided by employees and used in their work or operations for the insured;
    - h.) The rental value of an apartment or a house provided for an employee based on comparable accommodations;
    - i.) The value of lodging, other than an apartment or house, received by employees as part of their pay, to the extent shown in the insured's records;
    - j.) The value of meals received by employees as part of their pay to the extent shown in the insured's records;
    - k.) The value of store certificates, merchandise, credits or any other substitute for money received by employees as part of their pay;
    - l.) The payroll of mobile equipment operators and their helpers, whether or not the operators are designated or licensed to operate automobiles. If the operators and their helpers are provided to the insured along with equipment hired under contract and their actual payroll is not known, use 1/3 of the total amount paid out by the insured for the hire of the equipment;
    - m.) The payroll of executive officers of a corporation and individual insureds and co-partners. Use the payroll shown on the state exceptions under ISO Rule 24. For the purposes of payroll determination, managers of limited liability companies shall be considered executive officers and members of limited liability companies shall be considered co-partners;  
The executive officers of a corporation are those persons holding any of the officer positions created by the named

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insured's charter, constitution or by-laws or any other similar governing document.

The payroll of all executive officers of a corporation and individual insureds or co-partners engaged principally in clerical operations or as salespersons, and officers and co-partners who are inactive for the entire policy period, shall not be included for premium purposes.

For part-time or seasonal businesses the payroll amounts may be reduced by 2 percent for each full calendar week in excess of twelve during which the risk performs no operations.

- n.) The payroll of leased workers furnished to the named insured by a labor-leasing firm. Premium on such payroll shall be based on the classifications and rates, which would have applied if the leased workers had been the direct employees of the named insured. If payroll is unavailable, use 100% of the total cost of the contract for leased workers as the payroll of leased workers. The premium shall be charged on that amount as payroll; If investigation of a specific employee-leasing contract discloses that a definite amount of the contract price represents payroll, such amount shall be considered payroll for premium computation purposes.
- o.) Fees paid to employment agencies for temporary personnel provided to the insured.

3.) Exclusions

- a.) Tips and other gratuities received by employees;
- b.) Payments by an employer to group insurance or group pension plans for employees, other than payments covered by Paragraph E.2.e.;
- c.) The value of special rewards for individual invention or discovery;
- d.) Dismissal or severance payments except for time worked or accrued vacation;
- e.) The payroll of clerical office employees;  
Clerical office employees are those employees who work in an area which is physically separated by walls, floors or partitions from all other work areas of the insured and whose duties are strictly limited to keeping the insured's books or records or conducting correspondence, including any other employees engaged in clerical work in the same area.
- f.) The payroll of salespersons, collectors or messengers who work principally away from the insured's premises. Salespersons, collectors or messengers are those employees engaged principally in any such duties away from the premises of the employer;  
This term does not apply to any employee whose duties include the delivery of any merchandise handled, treated or sold.
- g.) The payroll of drivers and their helpers if their principal duties are to work on or in connection with automobiles;

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- h.) The payroll of aircraft pilots or co-pilots if their principal duties are to work on or in connection with aircraft in either capacity; and
    - i.) The payroll of draftsmen if their duties are limited to office work only and who are engaged strictly as draftsmen in such a manner that they are not exposed to the operative hazards of the business. The payroll of these draftsmen shall be assigned to the classification "Draftsmen" – Code 91805.
  - 4.) Overtime
    - a.) Definition

Overtime means those hours worked for which there is an increase in the rate of pay:

      - (1) For work in any day or in any week in excess of the number of hours normally worked, or
      - (2) For hours worked in excess of 8 hours in any day or 40 hours in any week, or
      - (3) For work on Saturdays, Sundays or Holidays.

In the case of guaranteed wage agreements, overtime means only those hours worked in excess of the number specified in such agreement.
    - b.) Exclusion Of Overtime Payroll

The extra pay for overtime shall be excluded from the payroll on which premium is computed as indicated in (1) or (2), provided the insured's books and records are maintained to show overtime pay separately by employee and in summary by classification.

      - (1) If the records show separately the extra pay earned for overtime, the entire extra pay shall be excluded.
      - (2) If the records show the total pay earned for overtime (regular pay plus overtime pay) in one combined amount, 1/3 of this total pay shall be excluded. If double time is paid for overtime and the total pay for such overtime is recorded separately, 1/2 of the total pay for double time shall be excluded.

Exclusion of overtime pay does not apply to payroll assigned to the "Stevedoring" classifications.
  - 5.) Application

The rates apply per \$1,000 of payroll.
- f. Total Cost

The total cost of all work let or sublet in connection with each specific project including:

  - 1.) The cost of all labor, materials and equipment furnished, used or delivered for use in the execution of the work, however, do not include the cost of finished equipment installed but not furnished by the subcontractor if the subcontractor does no other work on or in connection with such equipment; and
  - 2.) All fees, bonuses or commissions made, paid or due.

The rates apply per \$1,000 of Total Cost.
- g. Units

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A single room or group of rooms intended for occupancy as separate living quarters by a family, by a group of unrelated persons living together, or by a person living alone.

**6. Additional Interests - Liability<sup>[A16]</sup>**

Policies may be written to cover additional interests. Our premium charges are as listed below.

Form Number	Interest	Premium Charge
CG 2005	Controlling Interest	Included
CG 2010	Owner, Lessees or Contractor	\$100
CG 2011	Manager/Lessors	\$50 <sup>[CD17]</sup>
CG 2012	Permits	Included
CG 2013	Permits Related to Premises	Included
CG 2018	Mortgagee, Assignee or Receiver	Included
CG 2023	Executors, Administrators, Trustees	Included
CG 2024	Leased Land	Included
CG 2026	Designated Person	\$25 <sup>[CD18]</sup>
CG 2027	Co-Owner of Premises	Included
CG 2028	Lessor of Leased Equipment	\$50
CG 2029	Grantor of Franchise	\$100
CG 2036	Grantor of Licenses	Included
L 723 <sup>[CD19]</sup>	Blanket Additional Insured	\$100

**7. Additional Available Liability Coverages**

a. Employee Benefits Liability Coverage

- 1.) Description Of Employee Benefits Liability Coverage (L578)  
This endorsement may be attached to the Commercial General Liability Coverage Form to provide coverage against claims for damages because of the insured's negligent acts, errors or omissions committed in the administration of an employee benefit program.
2. Rating  
The charge is based on the number of employees. The charge applies per location. A \$1,500 deductible applies to each claim.

# of employees	25/50	100/200	300/600	500/1,000	1,000/2,000
1 – 5	\$ 50	\$ 60	\$ 75	\$ 85	\$100
6 - 20	\$ 75	\$100	\$125	\$150	\$175
21 - 50	\$100	\$125	\$150	\$200	\$250
51 - 100	\$250	\$325	\$400	\$500	\$600

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b. Hired and Non-owned Auto Liability Coverage

1.) Description of coverage

This endorsement provides both hired and non-owned auto coverage. Non-owned auto liability provides coverage for any auto that is not owned, borrowed or hired by the insured. Hired auto liability provides coverage for autos leased, hired or borrowed by the insured. This endorsement is not available to insureds that have a policy covering other commercial automobile exposures.

2.) Premium Determination

See [state exception pages](#) to determine availability and rates.

c. Aggregate limit applicable on a per-location basis

Form CG2504

Charge \$250 Flat

d. Waiver of Transfer of Rights of Recovery Against Others To Us

Form	Charge
CG 2404	\$50 Flat (per person or organization)

e. Molestation and Abuse Coverage - available for Allied Health classes [only](#)<sup>[CD20]</sup>

1) For Policies with One Professional Only:

This coverage is not available. The L-622 Molestation or Abuse Exclusion shall be attached to the policy. A -10% credit shall be applied against the General Liability premium after the coverage minimum premium check.

2) For Policies with Greater than One Professional:

a) Limits of \$50,000 Per Occurrence/\$100,000 Aggregate are included at no additional charge.

b) Optional Increased Limits

Calculated Premium = Maximum of [Base rate x hazard tier factor x number of professionals x limit factor, Coverage Minimum Premium]

Exposure basis: Number of Professionals

\$100K/\$300K Base Rate per Professional: \$20.00

Limit	Factor	Coverage Min. Prem.
\$100,000/\$300,000	1.000	\$100
\$300,000/\$300,000	1.198	\$200

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Limit	Factor	Coverage Min. Prem.
\$500,000/\$500,000	1.297	\$300
\$500,000/\$1,000,000	1.386	\$350
\$1,000,000/\$1,000,000	1.416	\$450
\$1,000,000/\$2,000,000	1.436	\$600
\$1,000,000/\$3,000,000	1.455	\$750

Hazard Tier	Tier Definition	Factor
LOW	Low hazard classes include therapy/counseling classes that do not work with minors; service classes that do not provide waxing and/or massage services; and do not include home health aides providing bathing and/or hygiene services. Additionally, the following classes are considered low hazard: Dietician/Nutritionist, Dental Assistant or Hygienist, EEG Technician, First Aid/CPR Training Services, Home Health Educator, Lactation Consultant, Medical Office Assistant or Administrative Assistant, Optician, Optometric Assistant, and Patient Intake Technician.	1.00
AVERAGE	Average hazard classes include therapy/counseling classes that work with minors on a supervised basis; service classes that do not provide waxing and/or massage services; and home health aides providing bathing and/or hygiene services. Additionally, the following classes are considered average hazard: Social Worker, Personal Trainer/Fitness Instructor, Physical Therapist or Aide, Occupational Therapist or Aide, Corrective Therapist, Rehabilitation Therapist, Polysomnographic Technologist, and Phlebotomist.	2.00
HIGH	High hazard classes include therapy/counseling classes that work with minors on a non-supervised basis; service classes that do provide waxing and/or massage services; and pastoral counselors. In addition, any class with 1 on 1 off-site interaction with children is considered high hazard.	5.00

- c) L 703 Molestation or Abuse Insurance Endorsement shall be attached to the policy.

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**D. PROPERTY**

These Property rates/rules are available for Allied Health and Medical Providers Office Package policies. Any exceptions are noted below.

**1. Definitions - Property**

**a. Construction**

The following definitions apply to all causes of loss other than Earthquake:

**1.) Frame (Code 1)**

Buildings where the exterior walls are wood or other combustible materials including construction where combustible materials are combined with other materials such as brick veneer, stone veneer, wood iron-clad, stucco on wood.

**2.) Joisted Masonry (Code 2)**

Buildings where the exterior walls are constructed of masonry materials such as adobe, brick, concrete, gypsum block, hollow concrete block, stone, tile or similar materials and where the floors and roof are combustible.

**3.) Non-Combustible (Code 3)**

Buildings where the exterior walls and the floors and roof are constructed of, and supported by metal, asbestos, gypsum or other non-combustible materials.

**4.) Masonry Non-Combustible (Code 4)**

Buildings where the exterior walls are constructed of masonry materials as described in Code 2, with the floors and roof of metal or other non-combustible materials.

**5.) Modified Fire Resistive (Code 5)**

Buildings where the exterior walls and the floors and roof are constructed of masonry or fire resistive material with a fire resistance rating of one hour or more but less than two hours.

**6.) Fire Resistive (Code 6)**

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Buildings where the exterior walls and the floors and roof are constructed of masonry or fire resistive materials having a fire resistance rating of not less than two hours.

b. Location

1.) Definition

For property damage rating, a location is defined as each separately rated, non-communicating building or structure.

c. Occupancy

Rating is based on the occupancy having the highest base rate

d. Protection class

ISO protection class assignments will apply. See Addendum.

**2. Rates - Property**

a. Rating Basis

Unless otherwise specified, all rates are for each \$100 of insurance and are annual rates. The following rates for buildings and business personal property are at 80% coinsurance and \$1,000 deductible:

1.) Office base rates

Buildings	Basic	Broad	Special
Frame	.42	.46	.49
Joisted Masonry	.39	.43	.46
Non Combustible	.39	.43	.46
Masonry Non Combustible	.29	.33	.34
Mod. Fire Resistive/ Fire Resistive	.25	.28	.29
Business Personal Property	Basic	Broad	Special
Frame	.49	.54	.56
Joisted Masonry	.46	.51	.53
Non Combustible	.46	.51	.53
Masonry Non Combustible	.34	.37	.39
Mod. Fire Resistive/ Fire Resistive	.29	.33	.34

2.) Bar and Tavern without Cooking or Fast Food restaurant base rates

Buildings	Basic	Broad	Special
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Frame	.93	1.02	1.06
Joisted Masonry	.82	.90	.94
Non Combustible	.72	.79	.82
Masonry Non Combustible	.55	.61	.63
Mod. Fire Resistive/ Fire Resistive	.45	.49	.51
Business Personal Property	Basic	Broad	Special
Frame	.98	1.08	1.13
Joisted Masonry	.87	.96	1.00
Non Combustible	.75	.82	.86
Masonry Non Combustible	.58	.64	.67
Mod. Fire Resistive/ Fire Resistive	.51	.56	.59

- 3.) Bar, Tavern with cooking (food sales <= 25% of annual sales) or convenience, delicatessen or grocery store with cooking base rates

Buildings	Basic	Broad	Special
Frame	1.03	1.13	1.19
Joisted Masonry	.91	1.00	1.05
Non Combustible	.78	.85	.90
Masonry Non Combustible	.61	.66	.70
Mod. Fire Resistive/ Fire Resistive	.49	.54	.57
Business Personal Property	Basic	Broad	Special
Frame	1.13	1.24	1.30
Joisted Masonry	1.00	1.10	1.15
Non Combustible	.86	.94	.99
Masonry Non Combustible	.67	.73	.77
Mod. Fire Resistive/ Fire Resistive	.58	.64	.67

- 4.) Bar, Tavern, Nightclub, Comedy club or Restaurant with cooking (food sales 26% or more of annual sales) base rates

Buildings	Basic	Broad	Special
Frame	1.21	1.33	1.40
Joisted Masonry	1.07	1.17	1.23
Non Combustible	.92	1.01	1.06
Masonry Non Combustible	.71	.78	.82
Mod. Fire Resistive/ Fire Resistive	.58	.64	.67
Business Personal Property	Basic	Broad	Special
Frame	1.33	1.46	1.54
Joisted Masonry	1.17	1.29	1.36

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Non Combustible	1.01	1.11	1.17
Masonry Non Combustible	.79	.86	.91
Mod. Fire Resistive/ Fire Resistive	.69	.76	.80

5.) Habitational base rates

Buildings	Basic	Broad	Special
Frame	1.27	1.34	1.38
Joisted Masonry	1.10	1.17	1.20
Non Combustible	1.03	1.09	1.12
Masonry Non Combustible	.90	.95	.98
Mod. Fire Resistive/ Fire Resistive	.67	.71	.73
Business Personal Property	Basic	Broad	Special
Frame	1.27	1.34	1.43
Joisted Masonry	1.13	1.19	1.27
Non Combustible	1.00	1.06	1.13
Masonry Non Combustible	.88	.93	.99
Mod. Fire Resistive/ Fire Resistive	.79	.83	.89

6.) Mercantile base rates (except Convenience, Deli and Grocery stores)

Buildings	Basic	Broad	Special
Frame	.67	.74	.77
Joisted Masonry	.58	.64	.67
Non Combustible	.48	.53	.55
Masonry Non Combustible	.42	.46	.48
Mod. Fire Resistive/ Fire Resistive	.32	.36	.37
Business Personal Property	Basic	Broad	Special
Frame	.70	.77	.81
Joisted Masonry	.67	.73	.77
Non Combustible	.49	.54	.57
Masonry Non Combustible	.42	.47	.49
Mod. Fire Resistive/ Fire Resistive	.39	.43	.45

7.) Convenience, Deli and Grocery Store without cooking base rates

Buildings	Basic	Broad	Special
Frame	.78	.86	.90
Joisted Masonry	.70	.77	.81
Non Combustible	.55	.61	.64
Masonry Non Combustible	.49	.54	.56

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Mod. Fire Resistive/ Fire Resistive	.37	.41	.43
Business Personal Property	Basic	Broad	Special
Frame	.90	.99	1.14
Joisted Masonry	.81	.89	1.02
Non Combustible	.63	.69	.80
Masonry Non Combustible	.54	.59	.68
Mod. Fire Resistive/ Fire Resistive	.51	.56	.64

- 8.) Parking Garage base rates (except Attendant Booths)  
We are offering rates for construction types listed below:

Buildings	Basic	Broad	Special
Masonry Non Combustible	.29	.33	.34
Mod. Fire Resistive/Fire Resistive	.25	.28	.29
Business Personal Property	Basic	Broad	Special
Masonry Non Combustible	.34	.37	.39
Mod. Fire Resistive/Fire Resistive	.29	.33	.34

- 9.) All Other base rates and Attendant Booths in Parking Garages

Buildings	Basic	Broad	Special
Frame	.90	.99	1.04
Joisted Masonry	.75	.83	.87
Non Combustible	.67	.73	.77
Masonry Non Combustible	.61	.67	.70
Mod. Fire Resistive/ Fire Resistive	.45	.50	.52
Business Personal Property	Basic	Broad	Special
Frame	1.04	1.16	1.21
Joisted Masonry	.89	1.00	1.04
Non Combustible	.74	.82	.86
Masonry Non Combustible	.64	.72	.75
Mod. Fire Resistive/ Fire Resistive	.61	.68	.71

- b. Percentage Wind Deductible:  
For 1% - Multiply above rates by .98  
For 2% - Multiply above rates by .97  
For 5% - Multiply above rates by .96
- c. Protection class surcharge  
- 7 & 8 apply a factor of 1.20  
- 9 & 10 apply a factor of 1.75

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- d. Coinsurance  
Multiply the 80% coinsurance building or personal property rate by the following factors to convert the 80% rate to 90% or 100% coinsurance.

100%	.90
90%	.95

- e. Deductible Options  
All property rates for buildings and personal property contemplate a minimum deductible of \$1,000. Apply the following factor for optional deductibles:

Deductible	Factor
\$1,000	1.00
\$2,500	0.95
\$5,000	0.90
\$10,000	0.85
\$25,000	0.80

- f. Amount of Insurance Credit  
Total Insured Value (TIV) = All Property Coverages at One Location.

If TIV > \$500,000, determine the Amount of Insurance Credit as follows:

$$\text{Credit} = 40\% \times [(TIV - \$500,000) / TIV]$$

Example: If TIV = \$1,000,000

$$\begin{aligned} \text{Credit} &= 40\% \times [(\$1,000,000 - \$500,000) / \$1,000,000] \\ &= 40\% \times (\$500,000 / \$1,000,000) \\ &= 40\% \times .5 \\ &= 20\% \end{aligned}$$

- g. Sprinkler Credit
1. Applicable to properties that are fully protected by an operational sprinkler system covering 100% of the premises.
    - a.) Multiply 80% Coinsurance rate by the applicable factor from the following table for risks in protection classes 1-8.

Construction (Code)	Buildings	BPP
Frame (1)	0.70	0.85
Joisted Masonry (2)	0.75	0.85
Non-Combustible (3)	0.77	0.85
Masonry Non-Combustible (4)	0.81	0.85
Modified Fire- Resistive (5) and Fire-Resistive (6)	0.84	0.85

- h. Building and Occupancy Characteristic Adjustments

1. For buildings 15 years old or less (date originally built), apply a .90 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).

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2. If the roof age is 5 years old or less, not flat, and the building age is 16 years or more, apply a .95 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).
3. If the risk has been in business at the insured location for 5 years or more, apply a .95 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).
4. If the risk has been in business at the insured location for three years or less, apply 1.10 factor to the 80% Coinsurance rate (applicable to Building, BPP, and Business Income calculations).

**4. Building Valuation Rule**

- a. When building coverage is provided, the building valuation is calculated as follows:
  - 1.) Step 1: Calculate the replacement cost of the building using our Value Factor Estimator:
    - a) Replacement Cost:  
To calculate the 100% estimated replacement cost, multiply the per square foot cost listed in the Construction Cost table times the appropriate Territorial Multiplier times the area of the building. (See [state exception page](#) for territorial multiplier)
    - b) Functional Replacement Cost:  
Functional replacement cost will be computed on the basis of replacement cost values. Refer to Replacement Cost above.
    - c) Actual Cash Value:  
Actual Cash Value will be computed on the basis of actual cash value and our depreciation table. To calculate the 100% estimated actual cash value, multiply the per square foot cost listed in the Construction Cost Table times (1.00-the appropriate depreciation factor) listed in the Depreciation Table times the appropriate Territorial Multiplier times the area of the building.
  - 2.) Step 2: Determine the following ratio: limit requested/valuation requested.
  - 3.) Step 3: Apply the applicable factor from the Building Value Factor Table to adjust for inadequately or over-insured buildings.
- b. Construction Cost-dollars per square foot:

Building Occupancy	Frame	JM	NC	MNC	MFR	FR
Apartments (3 stories or less)	72	75	77	85	88	87
Apartments (4 or more stories)	87	92	-	103	107	105
Mercantile with apartments (3 stories or less)	79	81	84	91	95	94
Mercantile with apartments (4 or more stories)	94	96	-	109	112	110
Bar with cooking	87	94	91	103	109	111

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Building Occupancy	Frame	JM	NC	MNC	MFR	FR
Convenience Market	75	83	77	84	105	100
Child Care	69	73	73	77	85	87
Office (3 stories or less)/Medical Clinic/Funeral Home/Veterinary Clinic	80	88	84	85	113	108
Office (4 or more stories)	92	100	95	96	127	122
Restaurant – Fast Food	115	125	119	128	160	154
Restaurant (Not Fast Food) Tavern or Bar with cooking	97	107	100	108	135	130
School	87	89	91	97	103	105
Shopping Center – Neighborhood Strip	68	72	71	76	83	86
Store – Retail	85	94	87	95	119	113
Warehouse	44	48	46	50	62	59
Church	110	117	113	122	133	132
Fitness Center/Club House/Recreation Building	79	85	86	95	99	95
Furniture Warehouse/Showroom/Wholesaler	52	55	53	60	68	67
Cinema or Theater	64	70	71	76	85	83
Indoor Tennis Club/Racquet Club	63	67	68	75	80	80
Indoor Ice or Roller Skating Rink	48	53	50	58	66	65
Nursing Home/Convalescent Center	99	103	106	109	115	116
Auto Repair/Service Center/Car Wash	66	72	65	77	86	86
Parking Garage	32	33	33	37	38	38

c. Risk factors that increase cost of construction calculation.

Occupancy	Elevators	Partially Sprinklered	100% Sprinklered
Apartment (3 stories or less)	2.110	1.230	2.450
Apartment (4 or more stories)	8.240	1.030	2.060
Bar with no cooking	1.770	1.240	2.480
Convenience Market	2.350	1.240	2.470
Mercantile with Apartment (3 stories or less)	2.350	1.380	2.750
Mercantile with Apartment (4 or more stories)	2.350	1.380	2.750
Office (3 stories or less)	2.110	0.780	1.550
Office (4 or more stories)	2.110	0.750	1.500
Restaurant (Not Fast Food) Tavern or Bar with cooking	1.770	1.240	2.480

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Restaurant - Fast Food	1.770	1.400	2.790
School	2.110	0.780	1.550
Shopping Center - Neighborhood Strip	2.350	1.110	2.220
Store - Retail	2.350	1.890	3.780
Warehouse	2.350	1.790	3.580
(Other)	2.110	1.240	2.480

d. ACV Depreciation Table

Building Age	Construction					
	Frame	JM	NC	MNC	MFR	FR
1	1%	1%	1%	1%	1%	1%
2	2%	25	25	2%	2%	1%
3	3%	3%	3%	3%	3%	2%
4	4%	4%	4%	4%	4%	3%
5-6	7%	7%	7%	7%	7%	5%
7	11%	11%	11%	11%	11%	6%
8-9	12%	12%	12%	12%	12%	8%
10	14%	13%	14%	13%	13%	9%
11	14%	13%	14%	13%	13%	10%
12-13	15%	14%	15%	14%	14%	11%
14	16%	15%	16%	15%	15%	12%
15	18%	15%	18%	15%	15%	13%
16	18%	17%	18%	17%	17%	14%
17	19%	17%	19%	17%	17%	14%
18	20%	18%	20%	18%	18%	15%
19	20%	19%	20%	19%	19%	16%
20	20%	20%	20%	20%	20%	16%
21	23%	21%	23%	21%	21%	17%
22	24%	21%	24%	21%	21%	18%
23	24%	23%	24%	23%	23%	19%
24	27%	23%	27%	23%	23%	19%
25	28%	24%	28%	24%	24%	19%
26	29%	25%	29%	25%	25%	21%
27	30%	26%	30%	26%	26%	21%
28	31%	27%	31%	27%	27%	22%
29	32%	27%	32%	27%	27%	23%
30	34%	28%	34%	28%	28%	25%
31	35%	29%	35%	29%	29%	26%
32	36%	30%	365	305	30%	27%
33	37%	31%	37%	31%	31%	28%
34	38%	32%	38%	32%	32%	29%
35	39%	33%	39%	33%	33%	30%
36	40%	34%	40%	34%	34%	31%
37	41%	35%	41%	35%	35%	32%
38	42%	36%	42%	36%	36%	33%
39	43%	37%	43%	37%	37%	34%

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Building Age	Construction					
	Frame	JM	NC	MNC	MFR	FR
40	44%	38%	44%	38%	38%	35%
41	45%	39%	45%	39%	39%	36%
42	46%	40%	46%	40%	40%	37%
43	47%	41%	47%	41%	41%	38%
44	48%	42%	48%	42%	42%	39%
45	49%	43%	49%	43%	43%	40%
46	50%	44%	50%	44%	44%	41%
47	50%	45%	50%	45%	45%	42%
48	50%	46%	50%	46%	46%	43%
49	50%	47%	50%	47%	47%	44%
50	50%	48%	50%	48%	48%	45%
51	50%	49%	50%	49%	49%	46%
52	50%	50%	50%	50%	50%	47%
53	50%	50%	50%	50%	50%	48%
54	50%	50%	50%	50%	50%	49%
55 and older	50%	50%	50%	50%	50%	50%

e. Building Value Factor Table (not applicable to vacant buildings)

% of Value	factor	% of Value	factor
30-39%	1.40	80-119%	1.00
40-49%	1.30	120-129%	.90
50-59%	1.20	130-139%	.85
60-69%	1.15	140-149%	.80
70-79%	1.10	150% & over	.75

f. Vacant Building Value Factor

If the existing structure values are \$20 or less per square foot, apply a 1.20 factor.  
Otherwise, apply a factor of 1.00

**5. Tenants Improvements and Betterments**

a. Explanation

Improvements and betterments are improvements to real property. They are of a permanent nature, such as a new storefront, decorations, partitions or elevators. The improvements and betterments are either installed or acquired by the tenant but are not legally removable by the tenant.

This coverage protects a tenant's use interest in improvements and betterments, which may be damaged or destroyed by a covered cause of loss.

b. Rates – use the applicable business personal property rate.

**6. Building and Personal Property Coverage Options**

a. Ordinance or Law Coverage

1.) Description of Coverage

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The following coverages respond to losses that result from enforcement of ordinances or laws regulating demolition and/or restoration of a building following physical damage to that building by a covered cause of loss. In the situation where the underlying property damage losses were caused by covered and excluded causes of loss, loss payment for ordinance or law coverages may be proportioned accordingly. Coverage does not include loss due to an ordinance or law with which the insured was required to comply before loss and failed to comply. Further, coverage applies only in response to the minimum requirements of an ordinance or law.

- a.) **Coverage A – Loss to the Undamaged Portion of the Building**  
The undamaged portion of a building will suffer a loss in value if an ordinance or law requires demolition following direct physical loss to another part of the building. Coverage A covers the loss in value of the undamaged portion of the building. (Coverage A does not cover the demolition costs. For such coverage, refer to Coverage B.)
  - b.) **Coverage B – Demolition Cost**  
Coverage B covers the costs to demolish the undamaged portions of the building.
  - c.) **Coverage C – Increased Cost of Construction**
    - (1) Following a physical loss to the building, Coverage C covers the increased expenses to repair, replace, reconstruct or remodel the damaged or undamaged parts of that building so that it complies with current building, zoning or land use laws or ordinances.
- 2.) **Coinsurance**
- a.) Minimum coinsurance of 80% applies to the building when Endorsement CP 04 05 is used. If the policy's Replacement Cost Optional Coverage applies (whether or not Coverage C also applies), this coinsurance requirement is based on the replacement cost of the current building. If the Replacement Cost Optional Coverage does not apply to the building, the coinsurance requirement is based on the actual cash value of the current building.
  - b.) The Coinsurance condition does not apply to the limit(s) of insurance selected for Coverages B and C.
- 3.) **Replacement Cost Coverage**  
When Coverage C applies to a building, activate the Replacement Cost Coverage of the underlying property damage coverage form, for that building. The Replacement Cost Coverage is activated by entry in the Declarations of the policy.
- 4.) **Rates**
- a.) **Coverage A – Loss to the undamaged portion of the building**  
Multiply the 80% or higher coinsurance building rates by 1.15 for each covered cause of loss. The resulting rates are the rates for Building Coverage including Coverage A.

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- b.) Coverage B – Demolition Cost Coverage  
Use the 80% coinsurance building rates. Multiply the rates by the limit of insurance in hundreds for Demolition Cost Coverage to obtain the additional premium for each covered cause of loss.
  - c.) Coverage C – Increased Cost Of Construction Coverage  
Use the 80% coinsurance building rates. Multiply the rates by the limit of insurance in hundreds for Increased Cost of Construction to obtain the additional premium for each covered cause of loss.
- b. Vacancy  
Use Vacancy Permit Endorsement CP 04 50.
  - 1.) Rules  
With respect to a policy issued to the owner or general lessee of a building, the building is considered vacant unless at least 31% of its total square footage is:
    - a.) Rented to a lessee or sub-lessee and used by the lessee or sub-lessee to conduct its customary operations; and/or Used by the building owner to conduct customary operations.
- c. Functional Building Valuation  
Functional Building Valuation Endorsement CP 109 provides coverage for specifically scheduled buildings which can be replaced with similar property that performs the same function as currently used but that is less costly.
- d. Utility Services Coverage – Power Outage  
Coverage for loss of or damage to Business Personal Property caused by an interruption in Power Supply Services to the described premises, resulting from direct physical loss or damage by a Covered Cause of Loss, is available. Use form CP149 Business Personal Property Utility Services Coverage – Power Outage.  
Charge \$.75[CD21] per \$100 of Limit  
Deductible is equal to the property deductible; coverage is not applicable until Power Supply Services have been interrupted for more than 4 hours.
- e. Equipment Breakdown Coverage  
Apply the flat charge based upon the total property limits of the risk. Rate each location separately. Do not interpolate premium between limits shown. Use the next higher limit premium (i.e. if total property limits are \$105,000 apply premium of \$109). Rates are per location.  
  
\$1,000 maximum deductible applies (if a lower deductible is selected for building or contents, the lower deductible will also apply to Equipment Breakdown).  
  
Applicable forms: CP110 (Basic Cause of Loss), CP111 (Broad Cause of Loss) or CP112 (Special Cause of Loss)

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Total Insurable Values up to	Premium	Total Insurable Values up to	Premium
\$50,000	55	\$1,600,000	451
\$60,000	64	\$1,700,000	460
\$70,000	73	\$1,800,000	469
\$80,000	82	\$1,900,000	478
\$90,000	91	\$2,000,000	487
\$100,000	100	\$2,100,000	496
\$110,000	109	\$2,200,000	505
\$120,000	118	\$2,300,000	514
\$130,000	127	\$2,400,000	523
\$140,000	136	\$2,500,000	532
\$150,000	145	\$2,600,000	541
\$160,000	154	\$2,700,000	550
\$170,000	163	\$2,800,000	559
\$180,000	172	\$2,900,000	568
\$190,000	181	\$3,000,000	577
\$200,000	190	\$3,100,000	586
\$220,000	199	\$3,200,000	595
\$240,000	208	\$3,300,000	604
\$260,000	217	\$3,400,000	613
\$280,000	226	\$3,500,000	622
\$300,000	235	\$3,600,000	631
\$325,000	244	\$3,700,000	640
\$350,000	253	\$3,800,000	649
\$375,000	262	\$3,900,000	658
\$400,000	271	\$4,000,000	667
\$425,000	280	\$4,100,000	676
\$450,000	289	\$4,200,000	685
\$475,000	298	\$4,300,000	694
\$500,000	307	\$4,400,000	703
\$550,000	316	\$4,500,000	712
\$600,000	325	\$4,600,000	721
\$650,000	334	\$4,700,000	730
\$700,000	343	\$4,800,000	739
\$750,000	352	\$4,900,000	748
\$800,000	361	\$5,000,000	757
\$850,000	370	\$5,250,000	766
\$900,000	379	\$5,500,000	775
\$950,000	388	\$5,750,000	784
\$1,000,000	397	\$6,000,000	793
\$1,100,000	406	\$6,250,000	802
\$1,200,000	415	\$6,500,000	811
\$1,300,000	424	\$6,750,000	820
\$1,400,000	433	\$7,000,000	829
\$1,500,000	442		

**7. Business Income and Extra Expense Coverage Options**

These coverage options are contained in Form CP 00 30 and Form CP 00 32.

a. Coinsurance Option

Factors are applicable to the 80% coinsurance building rates.

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Coinsurance %	W/ Extra Expense	W/O Extra Expense
100	.59	.54
90	.65	.59
80	.69	.63
70	.75	.68
60	.79	.72
50	.89	.81
No Coinsurance	2.28	2.08

b. Monthly Limitation Option

One Third	1.40
One Quarter	1.25
One Sixth	1.05

c. Extended Period of Indemnity

1.) Description of Coverage

The Extended Business Income additional coverage of Form CP 00 30 and Form CP 00 32 may be extended to cover additional loss of Business Income beyond 30 days by activating this Optional Coverage on the Declarations.

2.) Ineligibility

Do not use this optional coverage when the Maximum Period of Indemnity coverage option is applicable or the No-Coinsurance option is applicable.

3.) Rate Modification

Multiply the Business Income Coverage rates otherwise applicable by the factors in Table 2. Extended Period Of Indemnity Rate Modification Factors depending on the number of days that the coverage is extended.

Number Of Days*	Factor
60	1.10
90	1.15
120	1.20
150	1.30
180	1.40
270	1.45
365	1.50
450	1.55
540	1.60
630	1.65
730	1.70
*Interpolation not permitted	

d. Maximum Period of Indemnity

1.) Description of Coverage

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This coverage option is contained in Form CP 00 30 and Form CP 00 32 and is activated by entry on the Declarations. Under this option, the coinsurance clause of Form CP 00 30 and Form CP 00 32 is suspended and coverage applies for a maximum indemnity period of four months.

2.) Rate Modification

Multiply the base rates by the appropriate factor below, Maximum Period of Indemnity Rate Modification Factors, representing the insured's principal business, to obtain the rate.

Factors	Business Income	
	With Extra Expense	Without Extra Expense
Mercantile/Non-Manufacturing Operations	1.35	1.26
Manufacturing Operations	2.03	1.85
Rental Properties	1.04	0.95

e. Extra Expense Coverage Form

1.) Description Of Coverage

Extra Expense Insurance covers the necessary additional expenses undertaken to:

- a.) Avoid or minimize the interruption of business by continuing business operations, whether at the described premises or elsewhere; or
- b.) Minimize the interruption of business if the insured cannot continue business operations.

2.) Basic Form

Use Extra Expense Coverage Form CP 00 50 .

3.) Rules

a.) Coverage

Extra Expense Insurance may be written as a separate policy or as a separate item with direct property damage in one policy.

b.) Base Rate

Whenever the term "base rate" is used in the rules, it means the 80% coinsurance building rate.

c.) Coinsurance

There are no coinsurance provisions. Recovery is limited as shown on the Declarations to specified percentages times the limit of insurance, as follows:

The first percentage shown when the period of restoration is not in excess of 30 days;

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The second percentage shown when the period of restoration is in excess of 30 days but not in excess of 60 days; or

The third percentage shown when the period of restoration is in excess of 60 days.

d.) **Blanket Insurance**

Do not write insurance on a blanket basis covering more than one location or site. Insurance may be written to cover groups of buildings occupied by an insured as one operational unit at one site.

e.) **Rate Modification**

1.) Multiply the base rates by the appropriate factor below to obtain the extra expense rate.

Limits On Loss Payment	Factor
100%-100%-100%	4.00
40%- 80%-100	2.00
35%- 70%-100	1.90

**8. Causes of Loss – Basic Form**

a. **Description Of Covered Causes Of Loss**

This form provides coverages for the causes of loss of fire, lightning, explosion, windstorm or hail, smoke, aircraft or vehicles, riot or civil commotion, vandalism, sprinkler leakage, sinkhole collapse and volcanic action.

b. **Forms**

1.) Use Causes of Loss – Basic Form CP 10 10.

c. **Rules**

1.) We will use the fully developed class rates shown by class code in the rates section of this filing.

d. **Sprinklered Risks**

1.) **Description of Coverage**

Sprinkler Leakage is a Covered Cause of Loss under the Basic, Broad and Special Causes of Loss Forms. Coverage is provided automatically unless the Sprinkler Leakage Exclusion of the Additional Exclusions Endorsement CP 10 56 is shown to apply to the described property.

2.) **Definition of Automatic Sprinkler System**

a.) Any automatic fire protective or extinguishing system, including connected:

- (i.) Sprinklers and discharge nozzles;
- (ii.) Ducts, pipes, valves, and fittings;
- (iii.) Tanks, their component parts, and supports; and
- (iv.) Pumps and private fire protection mains.

b.) When supplied from an automatic fire protective system:

- (i.) Non-automatic fire protective systems; and
- (ii.) Hydrants, standpipes, and outlets.

This definition includes cooking protection equipment.

e. **Vandalism**

Vandalism is a covered cause of loss under the Basic, Broad and Special Causes of Loss Forms. Coverage is provided automatically unless the

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Vandalism Exclusion of the Additional Exclusion Endorsement CP 10 55 is shown to apply to the described property

**9. Causes of Loss – Broad Form**

- a. Description Of Covered Causes Of Loss  
This form provides the same coverage as the Basic Causes of Loss Form CP 10 10 and includes the following additional causes of loss:
  - 1.) Falling objects;
  - 2.) Weight of snow, ice or sleet; and
  - 3.) Water damage.An Additional Coverage for Collapse is also included.
- b. Form  
Use Causes of Loss – Broad Form CP 10 20.
- c. Rules
  - 1.) Coinsurance
    - a.) Property Damage Coverage Except Builders' Risk  
The minimum coinsurance is 80%.
    - b.) Time Element Coverage  
The minimum coinsurance is 50%

**10. Causes of Loss – Special Form**

- a. Description Of Covered Causes Of Loss
  - 1.) The Causes of Loss – Special Form provides coverage for risks of direct physical loss unless excluded or limited to eligible property, subject to certain exclusions and conditions.
  - 2.) The Theft Exclusion may be used to exclude theft coverage on eligible building and personal property
  - 3.) The Watercraft Exclusion modifies coverage provided under the Causes of Loss – Special Form to exclude watercraft damage to the following types of property:
    - a.) Retaining walls that are not part of a building;
    - b.) Bulkheads; or
    - c.) Pilings, piers, wharves or docks.
- b. Forms
  - 1.) Use Causes Of Loss – Special Form CP 10 30.
  - 2.) Use Theft Exclusion Endorsement CP 10 33 to exclude theft coverage.
  - 3.) Use Watercraft Exclusion Endorsement CP 10 35 when coverage is provided on waterfront property using Form CP 10 30.
- c. Rules
  - 1.) Coinsurance
    - a.) Property Damage Other Than Builders' Risk  
The minimum coinsurance is 80%.
    - b.) Time Element Coverage  
The minimum coinsurance is 50%.
- d. Offices  
Values of property in offices may be written as a separate item under the Causes of Loss – Special Form and all remaining property may be written under the Causes of Loss – Basic or Broad Forms. Offices at one location may

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be written as a separate item from all other personal property, using the office rates.

**11. Other Causes of Loss Forms**

a. Additional Exclusions

1.) Explanation

One or more of the following causes of loss may be excluded from coverage under the Causes of Loss – Basic, Causes of Loss – Broad and Causes of Loss – Special Forms:

- a.) Windstorm or Hail;
- b.) Vandalism;
- c.) Sprinkler Leakage.
- d.) Water Damage, Sprinkler Leakage, Weight of Ice or Snow or Sleet
- e.) Theft

2.) Forms

- a.) Use Windstorm Or Hail Exclusion Endorsement CP 10 54 to exclude Windstorm or Hail.
- b.) Use Vandalism Exclusion Endorsement CP 10 55 to exclude Vandalism.
- c.) Use Sprinkler Leakage Exclusion Endorsement CP 10 56 to exclude sprinkler Leakage. CP 10 56 may be used for properties which have a sprinkler leakage exposure, whether these properties qualify for sprinklered (specific) rating or are non-sprinkler-rated. CP 10 56 may not be used on non-sprinkler-rated properties which do not have a sprinkler leakage exposure.
- d.) Use Water Damage, Sprinkler Leakage, Weight of Ice or Snow or Sleet Exclusion CP114 when excluding these causes of loss.
- e.) Use Theft Exclusion CP1033 to exclude theft coverage

3.) Rates and Rate Modifications

a.) Windstorm or Hail

When Windstorm or Hail is excluded, multiply the 80% coinsurance rate by the appropriate factor for the remaining causes of loss.

State	Windstorm or Hail Credit Factor
Alabama[A22]	.65
Connecticut, Delaware, Georgia, Massachusetts, Maryland, New Jersey, New York, North Carolina, Rhode Island, South Carolina & Virginia	.85
Mississippi, Texas and Florida – remainder	.70
Florida - Collier, Lee, Charlotte, Sarasota, Manatee, Hillsborough, Pasco, Hernando,	.60

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Citrus, Levy & Dixie counties	
Florida – Dade, Broward, Palm Beach counties	.65
Florida – Florida Keys	.30
Remainder of Country	.95

- b.) Vandalism  
Multiply the rates shown in the rates section by .99 to exclude vandalism.
- c.) Water Damage, Sprinkler Leakage, Weight of Snow, Ice or Sleet  
Multiply the rates shown in the rates section by .97 to exclude water damage, sprinkler leakage, weight of snow, ice or sleet
- d.) Theft  
Multiply the rates shown in the rates section by .90 to exclude theft

## **12. Windstorm Or Hail Percentage Deductibles**

- a. Description
  - 1.) Percentage Deductibles  
The following deductibles may be used for the Windstorm or Hail cause of loss:
    - a.) 1% Deductible
    - b.) 2% Deductible
    - c.) 5% Deductible
  - 2.) Specific Insurance  
The dollar amount of the deductible will be equal to 1%, 2% or 5% of the Limit(s) of Insurance applicable to the property that has sustained loss or damage.
  - 3.) Blanket Insurance  
The dollar amount of the deductible will be equal to 1%, 2% or 5% of the value(s) of the property that has sustained loss or damage. The value(s) to be used are those shown in the most recent Statement of Values on file with the company.
  - 4.) Value Reporting Forms And Builders Risk Insurance  
For value reporting forms, the calculation of the deductible amount is based on reported values. There are variations for the situation where loss occurs prior to the first report, and for reports of value which show less than full values. If coverage is written blanket under a reporting form, the basis of the calculation is value at time of loss.  
For builders risk insurance, the calculation of the deductible amount is based on value at time of loss.
- b. Form  
Use Windstorm Or Hail Percentage Deductible Form CP 03 21.
- c. Rules
  - 1.) The Windstorm or Hail percentage deductibles apply whenever there is an occurrence of Windstorm or Hail.
  - 2.) The Windstorm or Hail deductible is calculated separately for, and applies separately to:

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- a.) Each building, if two or more buildings sustain loss or damage;
  - b.) The building and to personal property in that building, if both sustain loss or damage;
  - c.) Personal property at each building, if personal property at two or more buildings sustains loss or damage;
  - d.) Personal property in the open.
- 3.) The Statement of Values for a blanket policy should contain sufficient detail – value of each building, value of personal property at each building, value of personal property in the open – to complement the procedure set forth in the Windstorm or Hail Percentage Deductible endorsement.
- 4.) Percentage deductibles may vary by location. At a location all covered property must be written using the same percentage deductible.
- 5.) If some property at a location is written under a blanket limit of insurance and other property at the same location is written under a specific limit of insurance, all covered property at that location must be written using the same percentage deductible.
- When property is covered under the Coverage Extension for Newly Acquired or Constructed Property: In determining the amount, if any, that we will pay for loss or damage, we will deduct an amount equal to a percentage of the value(s) of the property at time of loss. The applicable percentage for Newly Acquired or Constructed Property is the highest percentage shown in the Schedule for any described premises.

**13. Sign Coverage**

Coverage is available for Outdoor signs which are the property of the insured or the property of others in the care, custody and control of the insured. Coverage will be added by using endorsement CP 1440 Outside Signs. Our standard property deductibles and deductible credits apply.

- a.) Premium Determination  
Sign Coverage \$3.00 per \$100 of value

**14. Glass Coverage**

Coverage is available for glass which is the property of the insured or where the tenant has a contractual responsibility for the glass.

- a.) Premium Determination
  - 1.) \$4.00 rate per linear foot for ordinary glass; or
  - 2.) \$1.00 per \$100 of value for glass with a specific dollar value.
  - 3.) Glass rates contemplate a minimum deductible of \$1,000.

Apply the following factor for optional deductibles:

Deductible	Factor
\$250	1.18

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\$500	1.12
\$1,000	1.00
\$2,500	0.80

**15. Value Plus and Value Endorsements**

The Value Plus (CP 108) and Value (CP131) endorsements can be added to accounts with Cause of Loss - Special form and Cause of Loss – Special form excluding theft. Use CP 108 when theft is included and CP 131 when theft is excluded. Premium is \$250 and applies per location.

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**Addendum: PUBLIC PROTECTION CLASSIFICATIONS (ISO)**

Public Protection Classifications are determined by using one of the following:

**A. Using Location<sup>(TM)</sup>:**

1. Location<sup>(TM)</sup> is a database that can be used to determine Public Protection Classifications for specific locations.
2. In the event that Location<sup>(TM)</sup> produces a split classification (e.g., in a 6/9 community where water source/hydrant information is not available) the classification number will be determined as follows:
  - a. If the risk address is within 1,000 feet of an approved water source, then the PPC to be assigned is the lower numbered class (e.g., Class 6 in the example above).
  - b. Otherwise the risk is assigned a PPC 9.

**B. Applying the following manual rules.**

**1. COMMUNITY MITIGATION CLASSIFICATIONS**

The most recent Insurance Services Office Community Mitigation Classification Manual may be used. The Community Mitigation Classification Manual includes:

- Jurisdictions name reflecting the name of the city, town, village, fire district, fire services areas or other classified areas.
- County in which the jurisdiction is located or notation that is an Independent City.
- Public Fire Protection Classification (PPC).
- Building Code Effectiveness Grading Classification (BCEGS).<sup>1</sup>

**2. CLASSIFICATION OF PUBLIC FIRE PROTECTION (PPC)**

- a. For jurisdictions listed with a single classification number, all properties listed within the jurisdiction should receive the listed classification number.
- b. For jurisdictions listed with multiple classification numbers (e.g. 6/9), known as a "split classification", the classification number applicable to individual properties is determined as follows:

**1) Split classification shown as "X/9" or "X/8B" (e.g. 6/9 or 6/8B):**

- a) For properties located five road miles or less from a responding fire station of a designated recognized fire department indicated in the listing for the jurisdiction, and within 1,000 feet of a fire hydrant, the first listed classification number applies (e.g. 6/9, use Class 6).
- b) For properties located five road miles or less from a responding fire station of a designated recognized fire department indicated in the listing for the

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<sup>1</sup> BCEGS is not currently used in our company's property rating.

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jurisdiction, and with a fire hydrant more than 1,000 feet, Class 9 or 8B applies.

c) For properties not qualifying for 1a) or 1b), Class 10 applies.

2) Split classifications displayed as "X/10" where no hydrants are installed (e.g. 9/10); or where hydrant distance does not apply due to an alternate creditable water supply (e.g. 7/10):

a) For properties located within five road miles or less (unless otherwise indicated in the designated recognized fire department indicated in the listing for the jurisdiction, the first listed classification applies ( e.g. 7/10, use class 7).

b) For properties not qualifying for 2a) above, Class 10 applies.

c. For jurisdictions or areas not listed, Class 10 applies.

d. Subscription fire departments are indicated by a footnote in the Community Mitigation Manual. Class 10 applies to individual properties that do not subscribe to the listed subscription fire department.

e. Communities with (\*\*) listed as the PPC refers to the footnotes for explanatory information.

f. If the line of insurance manual does not contain rating provisions for PPC 8B use PPC 9 for rating purposes.

g. For specifically rated commercial properties refer to the ISO Specific Property Information database for the applicable PPC.

h. Definitions:

1) "Recognized fire department" means a fire department meeting the minimum criteria of ISO's Fire Suppression Rating Schedule (FSRS).

2) "Primary fire department" means the fire department that has primary overall responsibility for the jurisdiction.

**3. CLASSIFICATION OF BUILDING CODE EFFECTIVENESS (BCEGS)**

Our company does not currently utilize BCEGS.

State:	District of Columbia	Filing Company:	United States Liability Insurance Company
TOI/Sub-TOI:	05.0 CMP Liability and Non-Liability/05.0003 Commercial Package		
Product Name:	Specialty General Package		
Project Name/Number:	Rule Revision/ PROF-SGP-2016-114-Edit		

## Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
11/16/2016		Rate	CW Rate Rule Manual	11/17/2016	CW SGP Package Rate and Rule Manual 11-09-2016 (INCLUDES PROPERTY) final.pdf